

Maryland Medical Assistance Program

The Year in Review

Fiscal Year 1980

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INTRODUCTION

Fiscal year 1980 marks the Maryland Medical Assistance Program's fourteenth full year of operation. The purpose of the Program is to provide the state's low income residents with access to a broad range of health care services. Statutory authority for the Program is contained in Title XIX of the Social Security Act and in Article 43, Section 42 of the Maryland Annotated Code. The Maryland Medical Assistance Program is administered within federal requirements by the Assistant Secretary for Medical Care Programs and is funded jointly by the state and federal governments.

The average monthly enrollment in the Maryland Medical Assistance Program in fiscal year 1980 (July 1, 1979 through June 30, 1980) was 376,276 people, 9% of the state's population. Program enrollees received services from approximately 8,000 participating providers. Nearly \$400 million was spent by the Program during the year to provide these health care services.

This publication describes the activities of the Maryland Medical Assistance Program in fiscal year 1980. The narrative portion provides information on Program enrollment, providers, payments, services and management controls. Also included are descriptions of the Medical Assistance Advisory Committee and the Pharmacy Assistance Program, and comments on Program trends in expenditures for institutional care and recent court decisions affecting the Program. Statistical tables on Program activities follow the narrative section.

MEDICAL ASSISTANCE ADVISORY COMMITTEE

The Maryland Medical Assistance Advisory Committee is a group of consumer representatives, Medical Assistance recipients, and health care providers who meet at least six times a year to provide consultation and advice to the Medical Assistance Program.

During fiscal year 1980 there were two standing subcommittees of the Advisory Committee. The Subcommittee on Priorities reviewed drafts of the Program's Five Year Plan and worked on modifications of the objectives contained in the Plan. The Subcommittee on State Legislation reviewed bills relevant to the Medical Assistance Program that were considered by the 1980 session of the Maryland General Assembly. In addition, two other

subcommittees met during the year. The Subcommittee on Certification of Care met with representatives from the Baltimore City Professional Standards Review Organization and four hospitals to develop a method for using telephone certification to accelerate the transfer of hospital patients to a more appropriate level of care. In April, 1980, an ad hoc Subcommittee on the Early and Periodic Screening, Diagnosis, and Treatment (EPSDT) program met with Medical Assistance Program staff and a representative of the Preventive Medicine Administration. They discussed the screening criteria used by the Program and methods for increasing the enrollment of children in the EPSDT program.

Listed below by the dates of expiration of their terms of office are the Advisory Committee members during fiscal year 1980.

July 1980

John Birkmeyer
Lee Britton
Jean Dockhorn
Carolyn Dyson
Kathleen Ellis

Gwendolyn Johnson
Lawrence LaMotte
Daniel J. O'Neal, III
Ethel Pace
Ronald Peterson

July 1981

Mildred Bright
Ellena Deans
Paul Joliet, M.D.
Margie Jones
Shirley Lawson

Philip Piasecki
Sidney Seidman, M.D.
Thomas Waters
Agnes Welch

July 1982

Geraldine Brown
Frances Dixon
Ellis Duke
James Harvey

Beverly Havard
Harry Klinefelter, M.D.
Jean Linkenhoker
Frances Young

ENROLLMENT

Medical Assistance *enrollees* are defined as those persons who apply for and are determined eligible to receive Public Assistance, Supplemental Security Income or Medical Assistance. Each enrollee receives a Medical Assistance card. In this report, *recipients* are defined as Medical Assistance enrollees who used their Medical Assistance cards to receive services.

During fiscal year 1980, the average monthly enrollment in the Maryland Medical Assistance Program was 376,276 people, 9.0% of the state's population. Enrollment rates ranged from 2.1% in Howard County to 26.8% in Baltimore City (see Figure 1).

From fiscal year 1967, the first full year of the Maryland Medical Assistance Program, through fiscal year 1973, the Program's enrollment increased at an average rate of over 9% per year. During fiscal year 1974, the trend was reversed when enrollment dropped by nearly 3%. Enrollment rose again in fiscal year 1975 and in fiscal year 1976. Another decline in enrollment began in the spring of 1976 and continued through fiscal year 1979, with enrollment dropping a total of 13.8%. In fiscal year 1980, the Program's enrollment increased by 2.8% (see Figure 2). Changes in economic factors such as inflation and the unemployment rate and increases in the Program's income standards have contributed to the fluctuation in average monthly enrollment.

There are two major categories of enrollees in the Medical Assistance Program.

1. The *Categorically Needy* are Medical Assistance enrollees who meet the financial eligibility requirements of the Aid to Families with Dependent Children (AFDC) Program (Title IV-A of the Social Security Act), the Supplemental Security Income (SSI) Program (Title XVI of the Social Security Act), or the General Public Assistance (GPA) Program. Federal matching funds are available to help pay for the cost of health care for AFDC and SSI recipients. Federal matching funds are not available for GPA recipients. Eligibility for SSI is established through the federal Social Security Administration and eligibility for AFDC and GPA is established through the state's local Departments of Social Services.
2. The *Medically Indigent* are those persons whose income and resources, although greater than those of the *Categorically Needy*, are insufficient to meet the cost of necessary health care services. To receive Medical Assistance benefits, the *Medically Indigent* must meet the Program's income standards, resource limits, and other eligibility requirements which the Program establishes consistent with federal regulations.

Medical Assistance eligibility for the *Medically Indigent* is determined by the local Departments of Social Services according to Maryland Medical Assistance Program regulations, guidelines and standards. It is based on the number of persons in the family unit, the family's

Figure 1

ENROLLMENT IN MARYLAND MEDICAL ASSISTANCE PROGRAM BY POLITICAL SUBDIVISION

Fiscal Year 1980

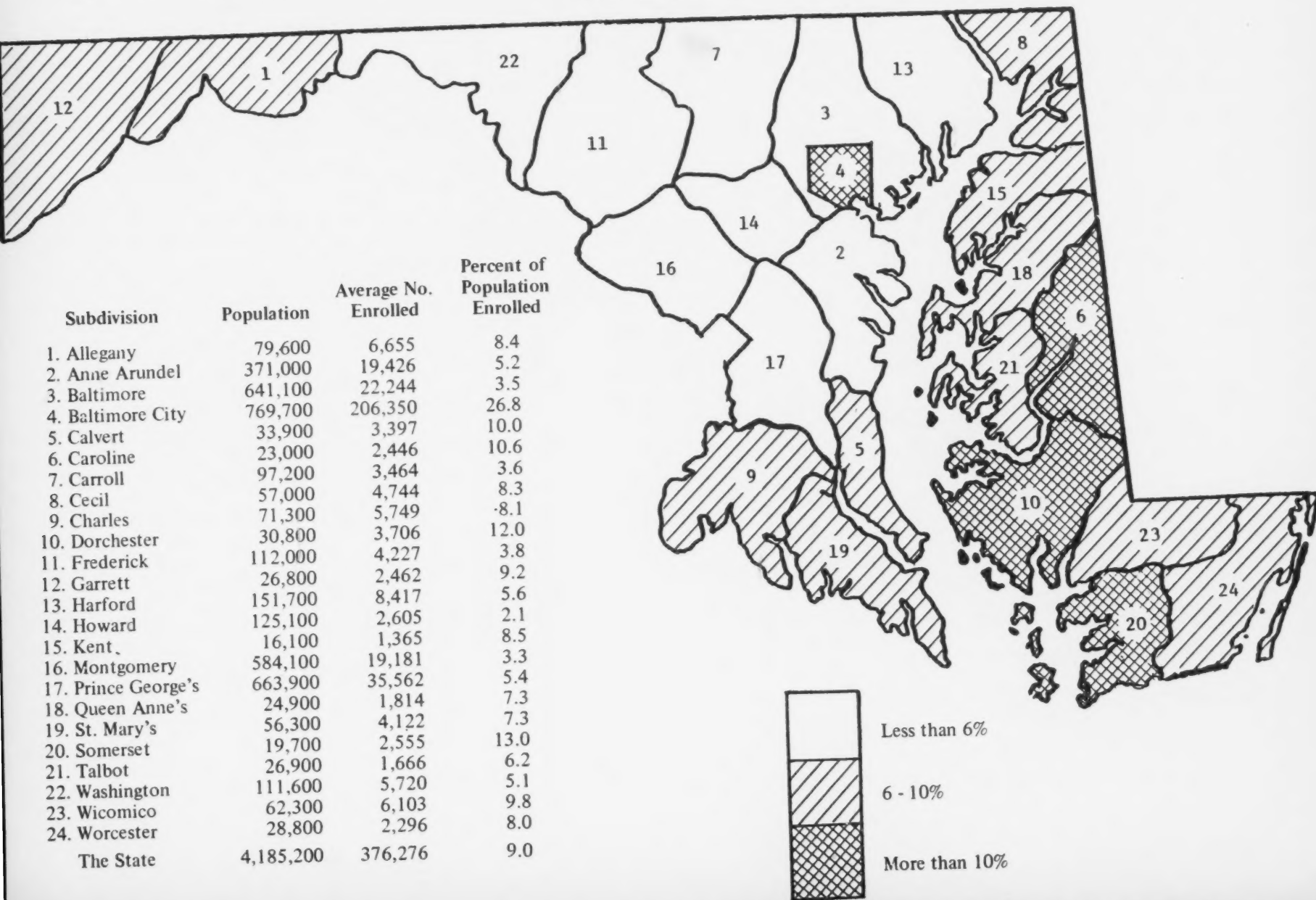
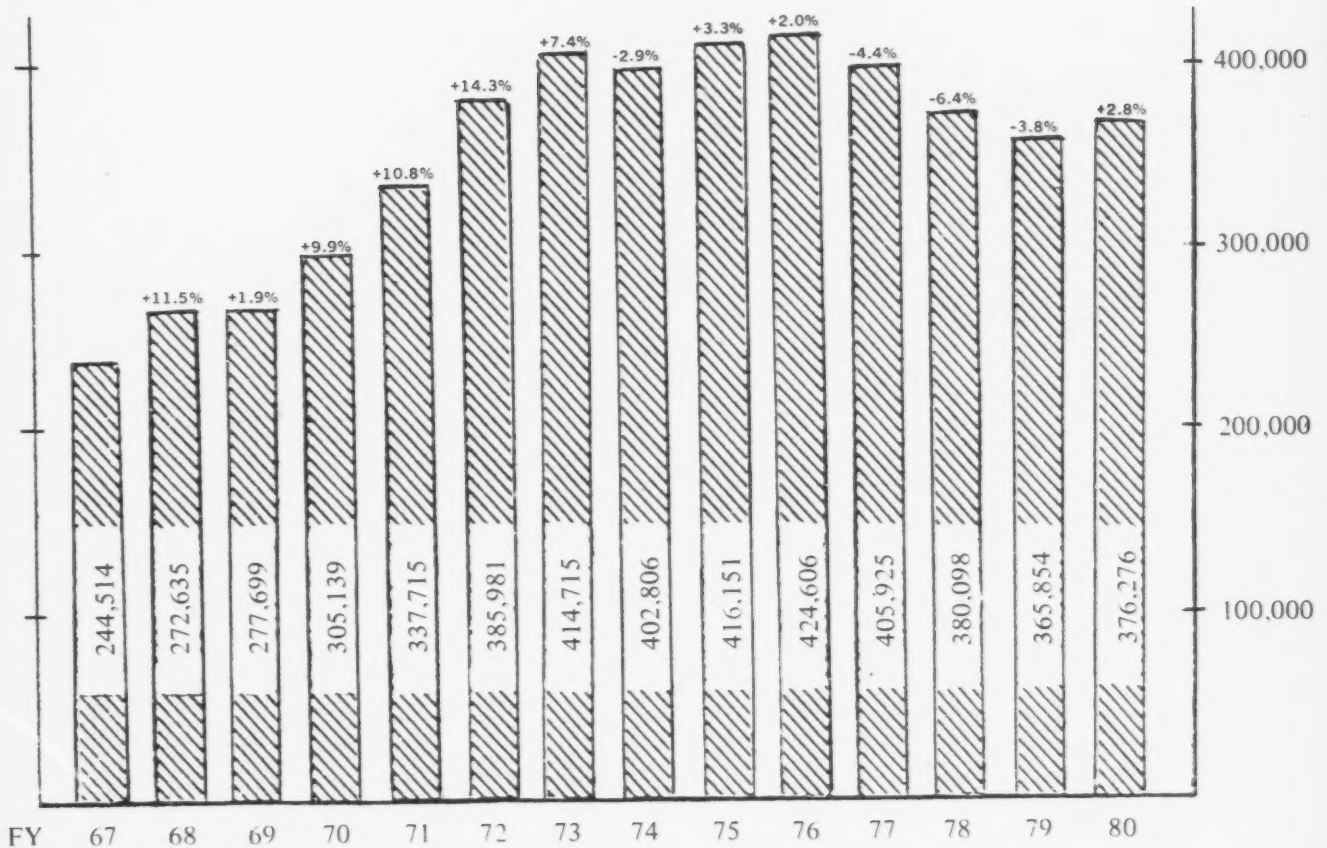


Figure 2

**MARYLAND MEDICAL ASSISTANCE PROGRAM
AVERAGE MONTHLY ENROLLMENT
Fiscal Years 1967 - 1980**



assets, and its net income (gross income less certain deductions and exclusions). The following chart shows the net income and the assets standards for fiscal year 1980.

Family Size	Net Income Standards	Assets Standards
1	\$2,600	\$2,500
2	3,100	2,600
3	3,600	2,700
4	4,100	2,800
Each Additional Person	+500	+100

Most persons aged 65 years and older and many blind and disabled persons who are enrolled in the Medical Assistance Program are also entitled to Medicare benefits. For persons enrolled in both Medicare and Medicaid, the Medical Assistance Program pays the required

premiums for coverage under Medicare Part B and also pays for the deductibles and coinsurance portion of Medicare claims.

Enrollees who qualified for Medical Assistance through federally matched programs (AFDC, SSI and Medically Indigent) accounted for 83.6% of total eligibles. The remaining 16.4% qualified through state-only programs. Enrollees who were younger than twenty-one years of age accounted for 50.8% of total enrollees and 11.2% were sixty-five or older. Females represented 61.8% of the total eligibles while 61.8% of enrollees were non-white.

PROVIDERS

Approximately 8,000 Maryland health care providers received payments from the Maryland Medical Assistance Program for services rendered to eligible recipients in fiscal year 1980. The list of Maryland providers includes 59 hospitals, 165 nursing homes, 7 health maintenance organizations, 32 home health agencies, and approximately 4,700 physicians and physician groups, 1,300 dentists, dental groups and clinics, 800 pharmacies, and 900 special services providers.

Each Medical Assistance enrollee may enroll in a health maintenance organization or may receive services from participating physicians, dentists, pharmacies or other providers of his choice.

Providers must be approved by the Program in order to participate. Approximately six million provider invoices were processed by the Program in fiscal year 1980. About 15% of all invoices were returned to providers for such reasons as recipient ineligibility or errors made in completing invoices. The chart below details the number of invoices paid by service type.

NUMBER OF INVOICES - FY 1980

Physician	1,316,621
Pharmacy	2,442,997
Home Health	7,205
Dental	164,086
Hospital Inpatient	112,039
Hospital Outpatient	812,533
Special Services	229,165
TOTAL	5,084,646

Ninety percent of all complete and accurate invoices are paid within three to four weeks of receipt by the Medical Assistance Program. The first two to three weeks is required to process the invoices and prepare vouchers. An additional week is required for submission to the comptroller's office and processing and payment of the vouchers.

Liaison committees have been formed with providers of nursing home, pharmacy, podiatry, dental, physician and vision care services. The Program works closely with these liaison committees to explain policies and procedures and to resolve problems.

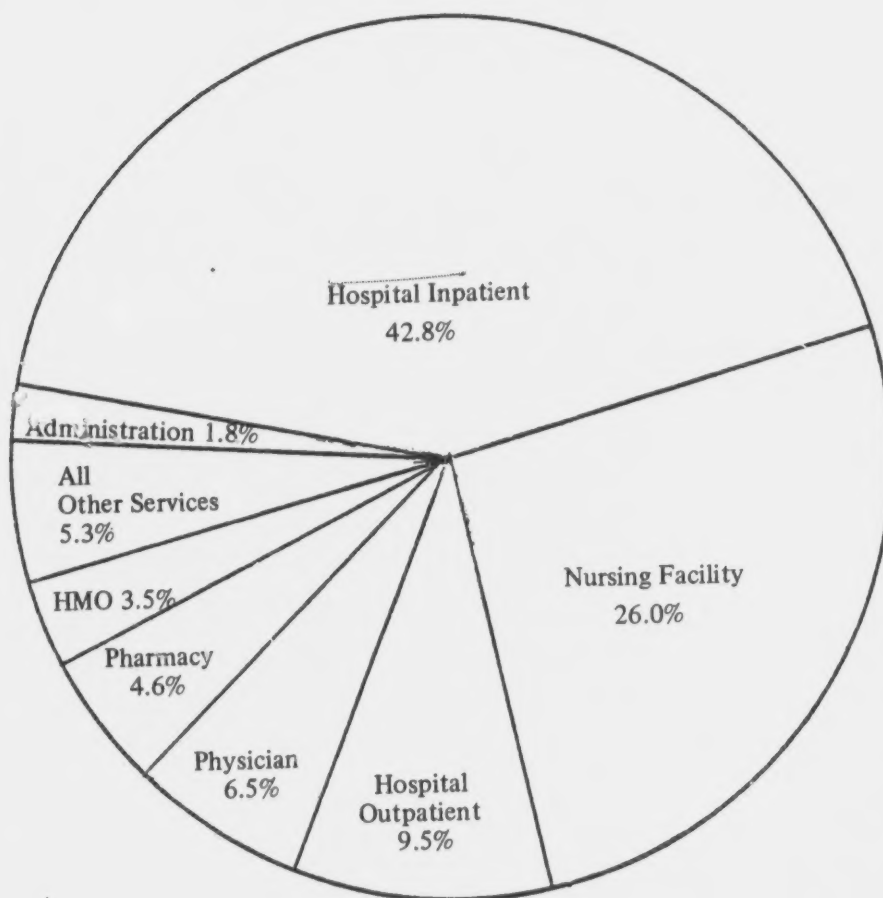
PAYMENTS

Total Medical Assistance Program expenditures in fiscal year 1980 were \$396,438,745. Approximately 41% were federal funds and 59% were state funds.

Medical Care Programs' administration costs for fiscal year 1980 were \$7,132,466, about 1.8% of total Program costs. Health care payments were \$389,306,179. Figure 3 shows total Program payments in fiscal year 1980 by major categories. However, until the current data processing system is replaced, all data for Program expenditures cannot be merged into one computer file. Therefore, the tables at the end of this report do not include financial data on the following payments: premiums paid for buy-in of Part B of Medicare (\$6,746,211); capitation payments for health maintenance organizations (\$13,958,002); payment to local health departments for screening under the Early and Periodic Screening, Diagnosis and Treatment program (\$277,570); and payment for General Transportation services (\$669,703). This report details the remaining \$367,654,693 spent by the Program for services provided to recipients in fiscal year 1980.

Figure 4 compares enrollees and payments by various characteristics. Comparisons by age of eligibles reveal that although enrollees 65 years or older represented only 11.2% of the total eligibles, they accounted for 32.5% of total payments. Those under 21 years of age accounted for 50.8% of enrollees but only 20.4% of Program payments. Analysis by eligibility category shows that AFDC recipients represented 57.6% of all enrollees and accounted for just 29.7% of Program payments. The federally matched Medically Indigent eligibles accounted for only 12.0% of enrollees but 33.2% of payments. SSI recipients represented 14.0% of enrollees and

Figure 3
TOTAL MARYLAND MEDICAL ASSISTANCE PROGRAM PAYMENTS
 Fiscal Year 1980



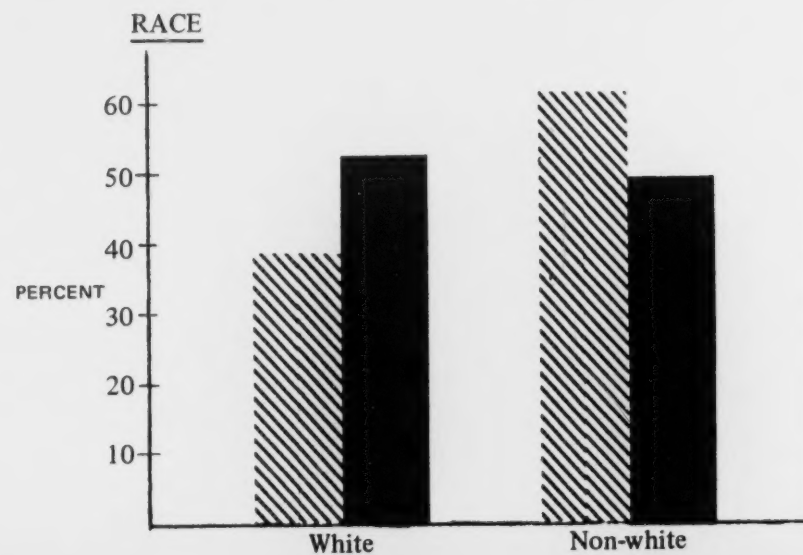
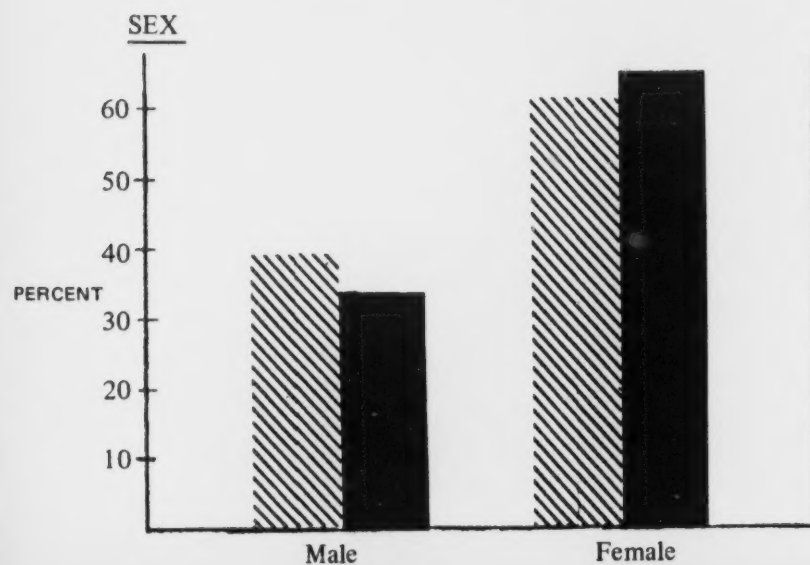
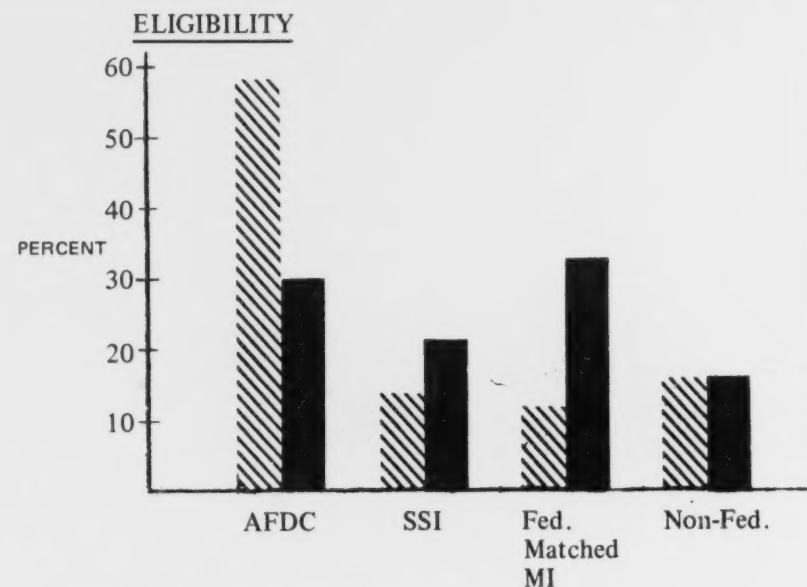
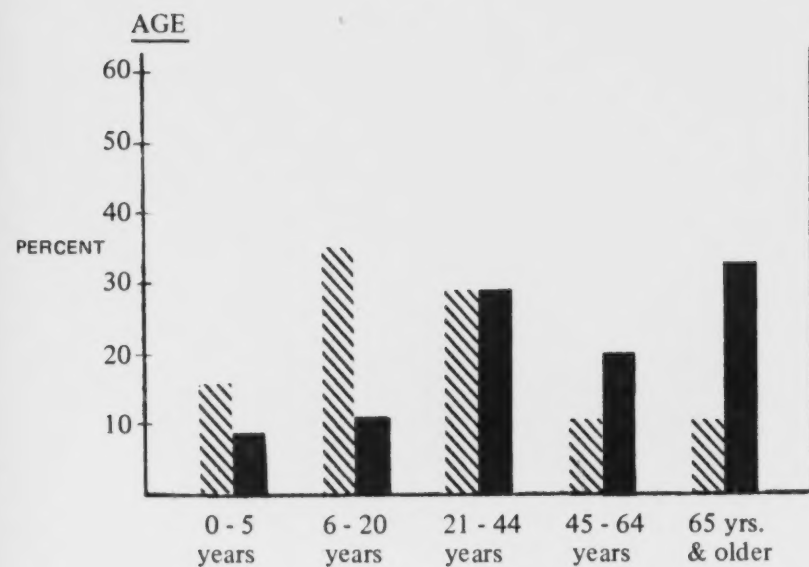
Hospital Inpatient	\$169,532,879
Nursing Facility	103,213,195
Hospital Outpatient	37,819,979
Physician	25,800,272
Pharmacy	18,119,414
Health Maintenance Organization	13,958,002
All Other Services	20,862,438
Administration	<u>7,132,466</u>
Total	\$396,438,745

Figure 4

MARYLAND MEDICAL ASSISTANCE PROGRAM ENROLLMENT AND PAYMENTS BY SELECTED CHARACTERISTICS

Fiscal Year 1980

Enrollment
Payments



40.3% of payments. Females made up 61.8% of enrollment and accounted for 65.9% of expenditures. Although white enrollees represented 38.2% of the eligibles, they accounted for 52.6% of total payments in fiscal year 1980.

SERVICES

A broad range of services is offered to Medical Assistance enrollees in Maryland. The federal government mandates that all state Medicaid programs provide hospital inpatient and outpatient services, physician services, other laboratory and X-ray services, skilled nursing facility services, home health care for adults, family planning services, early and periodic screening, diagnosis and treatment for children and transportation services. The federal government also participates in funding the following optional services which Maryland provides: long-term intermediate care, dental care, vision services, podiatry services, clinic services, pharmacy services, medical supplies and equipment, enrollment in health maintenance organizations, medical day care, and other special treatment services.

Hospital Services

Fiscal Year 1980 was the third year of the three-year "Medicare Experiment", a reimbursement plan under which the Medical Assistance Program and Medicare pay hospitals according to rates approved by the Health Services Cost Review Commission. The reimbursement rates are constructed so that the Program assumes a portion of each hospital's bad debts. The Program's share is based upon the annual hospital service utilization rate of its recipients.

Regulations expanding Medical Assistance hospital coverage took effect July 1, 1979. Newly covered or expanded services include unlimited stays for psychiatric patients in acute general hospitals, admission to private psychiatric hospitals for recipients 65 years of age and older, sterilization and reversal procedures, admission of alcohol and drug abusers for counseling and rehabilitation, occupational therapy, leaves of absence, psychological evaluations and treatment, and hearing therapy and audiometric tests if required as the result of early and periodic screening, diagnosis and treatment screening. Program control was strengthened by introducing some additional preauthorization requirements and some limitations on coverage.

In fiscal year 1980 the Medical Assistance Program continued its close working relationship with eight federally funded Professional Standards Review Organizations (six in Maryland, one in Washington D.C. and one in Delaware). These non-profit, physician-operated organizations are responsible for assuring that health care for federally funded patients in acute hospitals is medically necessary, provided in accordance with professionally recognized standards of quality, and provided in the minimum duration and most economical level of institutional care appropriate to the patient's medical care needs.

In fiscal year 1980 approximately 69,000 persons received about 586,000 days of inpatient care in acute general hospitals which cost the Program \$169.5 million. The average per diem rate of \$269.89 was 9.9% higher than the fiscal year 1979 average of \$245.53. There were approximately 699,000 hospital outpatient visits by about 207,000 persons in fiscal year 1980, costing the Program \$37.8 million. The average of \$54.09 per visit was 10.7% higher than the fiscal year 1979 average of \$48.88 per visit. (See Tables 1, 7, 8, 9, 13, 15 and 25 for more information.)

Nursing Facility Services

Nursing facility services are provided to medically and financially eligible recipients. During fiscal year 1980 several changes were made in the definition of levels of care. As of December 14, 1979, regulations provided for Program payment for skilled nursing facility services at a level of care equal to the Medicare definition for skilled care and expanded the Program's coverage to include skilled care for patients under 21 years of age. Effective January 1, 1980, regulations were amended to combine the Intermediate Care - Type A and Intermediate Care - Type B programs into one level of care equal to the federal definition of Intermediate Care. From July 1, 1979 to December 31, 1979 the reimbursement was \$33.31 per day for Intermediate Care - Type A and \$24.84 per day for Intermediate Care - Type B. The reimbursement ceiling from January 1, 1980 to June 30, 1980 was \$33.31 per day for both skilled and intermediate care.

The Program paid \$103 million for 4.2 million days of care in fiscal year 1980 as compared to \$87 million for 3.8 million days of care in fiscal year 1979. The average cost of \$24.29 per patient day in fiscal year 1980 was 6.4% higher than the fiscal year 1979 average of \$22.85.

Payments from patients' own resources in fiscal year 1980 accounted for an additional average of \$7.23 per day, a 12.1% increase from the average of \$6.45 in fiscal year 1979. (See Tables 1, 7, 8, 9, 14, and 25 for more information.)

Physician Care Services

Physicians' services reimbursed under the Medical Assistance Program are divided into two major categories: physician services rendered in the home, office or nursing home (including services in free-standing clinics); and physician services rendered in the hospital.

In order to make reimbursement to physicians more equitable and to increase physician participation, the Program increased fees for physician home and office visits and selected surgical procedures in fiscal year 1980. The Program continued to use the Current Procedural Terminology - Fourth Edition (CPT-4) codes adopted in fiscal year 1979 for reporting by physicians and laboratories. The use of CPT-4 codes allows for more simple and systematic reporting procedures.

In fiscal year 1980, the Program reimbursed providers over \$12 million for approximately 700,000 physician visits in the home, office or nursing home. Reimbursement for physician services in the hospital totaled \$13.8 million. (See Tables 1, 7, 8, 9, 16, 17, 18 and 25 and Appendix A for more information.)

Pharmacy Services

Medical Assistance recipients may obtain prescription drugs and other specified items such as insulin syringes and needles or certain family planning products when ordered by a physician. Recipients are responsible for a co-payment of 50 cents for each prescription filled except for EPSDT related and family planning prescriptions.

To encourage the utilization of approved generic drug products, a state drug formulary was adopted in March, 1980 providing pharmacies and physicians with a list of approved, therapeutically equivalent drugs. The Program also added 13 new drugs to the list of those with maximum allowable cost (MAC) limits, increasing the total number of price-controlled drugs to 42.

The Medical Assistance Program paid \$18.2 million for 2.5 million prescriptions in fiscal year 1980, an average of \$7.42 per prescription. (See Tables 1, 7, 8, 9, 19, 20 and 25 and Appendices B and C for additional information.)

Health Maintenance Organizations

The Medical Assistance Program currently has contracts with seven health maintenance organizations (HMOs) to provide comprehensive health care services to Medicaid recipients. Six are located in the Baltimore metropolitan area and the other one serves recipients in Anne Arundel and Calvert counties.

In fiscal year 1980, an average of 27,440 Medicaid eligibles were enrolled in the HMOs each month. The cost of this program was \$13.9 million, an average of \$42.39 per person per month. In fiscal year 1979, 28,000 eligibles participated in HMOs at a cost of \$41.16 per person per month.

Dental Program

The Program covers comprehensive dental services for Medical Assistance recipients under 21 years of age. Recipients who are 21 years old or older are eligible to receive services only for the treatment of a dental emergency and a few other specified services. Certain dental procedures require preauthorization.

In fiscal year 1980, the dental program expended \$6.6 million to provide dental services to over 84,000 Medical Assistance recipients. These figures include expenditures for comprehensive dental services that the U.S. Court of Appeals, in Kimble v. Buck, ordered the Program to reinstate for ten days in February, 1980. Over 1,400 dentists provided services to Medical Assistance recipients during fiscal year 1980. (See Tables 1, 7, 8, 9, 21, 22 and 25 and Appendix D for more information.)

Home Health Services

The services reimbursed through the Home Health program included skilled nursing care, physical therapy, speech pathology services, occupational therapy, medical social service and

home health aide services. Home health recipients must be homebound and under the care of a physician who orders the type, frequency and duration of home health services to be provided. Recipients who do not need skilled services may receive non-skilled services or home health aide services if these services will prevent or postpone institutionalization. Five additional home health service agencies participated in the Program in fiscal year 1980, bringing the total to 32. They serve all jurisdictions except Calvert, Charles, Queen Anne's and Worcester counties.

Home health service providers are reimbursed on a per visit basis. In fiscal year 1980 approximately 1,900 persons received home health services costing the Program nearly \$952,000, an average of \$487.97 per recipient. The average cost per recipient was 40.9% higher than the fiscal year 1979 average of \$346.32. (See Tables 1, 7, 8, 9, 23 and 25 for additional information.)

EPSDT Program

The early and periodic screening, diagnosis and treatment (EPSDT) program consists of comprehensive health care services which are designed to detect physical and mental health problems and to provide necessary follow-up care to Medical Assistance recipients under 21 years of age. Federal regulations require the Program to assure the availability and delivery of EPSDT services to all eligible recipients who request them. The screening services, which are provided by the 24 local health departments, seven health maintenance organizations, and other approved providers, may include: a physical examination; laboratory tests; immunizations; hearing, vision, developmental, language and speech, and dental check-up; and other optional screening procedures. The diagnostic and treatment services may be delivered by the screening provider or by another health care provider who participates in the Medical Assistance Program.

To increase the availability of EPSDT services throughout the State, provider participation was expanded from the local health departments and health maintenance organizations to include physicians in the private sector. During fiscal year 1980, 58 offices and clinics, which represent nearly 100 physicians, began participating as EPSDT providers.

In fiscal year 1980, the local health departments completed 5,908 screenings. These screenings were the result of 20,084 clinic visits. Payments for these services totaled \$277,570. (See Appendix E for more information.) Health maintenance organizations reported approximately 2,000 completed screenings, for which reimbursement was included in the monthly capitation fee for each enrollee. The five Children and Youth Clinics in Baltimore City provided 30,797 screenings which were reimbursed a fixed fee for each visit. Private providers, who began submitting invoices for screening in October, 1979, were reimbursed \$147,751 for 5,586 screens. The total number of screenings in fiscal year 1980 was over 44,000.

The Program has contracted with a private, health management corporation to improve the EPSDT program in Baltimore City. The contractor has responsibility for providing outreach activities which include informing eligible families of the value of preventive health services and encouraging their participation in the EPSDT program. The contractor is also responsible for enrolling providers and maintaining a computerized case management system to track eligibles who are participating in the EPSDT program. The Program plans to continue this effort in the City and, to comply with federal regulations, expand the contract on a statewide basis during fiscal year 1981.

Other Services

Medical Day Care - The Maryland Medical Assistance Program began reimbursing for medical day care services effective January 1, 1980. Adult day care centers participating in the Program must provide medical services, nursing services, physical therapy and occupational therapy as needed, personal care, nutrition services, medical social services, an activity program, and transportation as needed. This service is provided to meet the long-term care needs of impaired adults at risk of institutionalization and, as such, recipients must be certified by the PSRO as requiring nursing home care. Medical day care was made available in May, 1980, through one provider, the Levindale Adult Day Treatment Center in Baltimore City.

Vision Care Services - The Vision Care Program covers examinations and eyeglass services rendered by optometrists and opticians for recipients of all ages, based on limitations

implemented in January, 1976. Other diagnostic and treatment services are also available. Providers must obtain preauthorization from the Program for vision care services not covered under the Medicare Program. In fiscal year 1980, the maximum reimbursement for examinations and the fitting and dispensing of eyeglasses was increased.

Medical Supplies and Durable Equipment - The Program may furnish certain medical supplies and may rent, purchase or repair durable medical equipment for eligible recipients based upon the particular need and type of equipment. Payments are made for oxygen services and new medical equipment which allows patients to be treated at home rather than in a hospital. Payments for supplies that were reimbursed under the Pharmacy program are now included in the Medical Supply and Durable Equipment program. Services for covered equipment or supplies costing over \$40 are subject to preauthorization by the Program.

Transportation Services - There are two categories of transportation services available to recipients. The Ambulance and Wheelchair Van program reimburses providers for necessary non-emergency trips to and from hospitals. All trips to hospital out-patient departments must be preauthorized. Providers were given a fee increase effective January 1, 1980.

The General Transportation Services program pays for the cost of transportation of Medical Assistance recipients to and from health appointments by cars, vans, taxis and buses. Providers include health departments, hospitals and community groups.

Podiatry Services - The Podiatry program covers surgical and emergency services and limited routine foot care in the recipient's home, the podiatrist's office, or a nursing facility. Payment is also allowed for surgery performed in a hospital.

Physical Therapy Program - The Physical Therapy program covers medically necessary therapy when ordered by a physician, podiatrist, or dentist and when provided in the recipient's home, the therapist's office, or a domiciliary care facility.

Diagnostic Laboratory Program - This program reimburses independent laboratories for laboratory procedures ordered by a physician, podiatrist or dentist. This program does not

include services rendered by physicians for their own patients in their office. Laboratories may bill the Program only for those procedures for which the laboratory has been certified by Medicare.

Geriatric Evaluation Service - The Geriatric Evaluation Service (GES) provides a multidisciplinary assessment of the needs and resources of an elderly person considered for admission to a mental hospital or other long-term care facility. GES is administered by the Aged and Chronically Ill Administration of the Department of Health and Mental Hygiene and is provided through the local health departments. It provides health and social assessment of aged persons at risk of institutionalization and assists patients, physicians and other caregivers in implementing its recommendations. Services are located in all Maryland jurisdictions except Calvert and Charles counties, where residents have access to the service in neighboring counties. Program control was strengthened during fiscal year 1980 through a joint audit program with the Aged and Chronically Ill Administration. Services were evaluated as to their appropriateness and quality for Medical Assistance recipients. Of the total 5,749 contacts made by GES teams in fiscal year 1980, 21.4% or 1,230 contacts were for Medical Assistance recipients.

Community Placement Program - The Community Placement program channels individuals who need long-term health care so as to prevent inappropriate institutionalization, promote medically necessary institutionalization, enhance deinstitutionalization, utilize existing community resources and identify services required to maintain chronically ill and aging recipients in the community. Baltimore City, and Baltimore, Montgomery, and Queen Anne's counties have received Community Placement program grants. Plans are being made to expand the service on a statewide basis as funds become available.

MARYLAND PHARMACY ASSISTANCE PROGRAM

The Maryland Pharmacy Assistance Program was established by legislation passed in the 1978 session of the Maryland General Assembly and assigned to the Assistant Secretary for

Medical Care Programs. The purpose of this program is to provide help in paying for prescriptions, insulin and certain medical supplies to low-income families and individuals who are not eligible for Medical Assistance. The Pharmacy Assistance Program, implemented in January, 1979, is funded entirely by the state.

Eligibility for Pharmacy Assistance is based on the financial resources available to the family unit. In 1979 the Maryland General Assembly passed House Bill 955, which increased the maximum allowable income level from \$1,000 to \$1,500 above the Medical Assistance scale. The assets standards for the Pharmacy Assistance Program are the same as those for the Medical Assistance Program. The following chart shows the gross income and the assets levels for fiscal year 1980.

<u>Family Size</u>	<u>Gross Income Standards</u>	<u>Assets Standards</u>
1	\$4,100	\$2,500
2	4,600	2,600
3	5,100	2,700
4	5,600	2,800
Each Additional Person	+500	+100

In fiscal year 1980, there were 7,344 enrollees for whom 134,825 prescriptions were filled at a cost to the Program of \$1,128,060, an average of \$8.37 per prescription. Recipients paid \$1.00 co-payment for each prescription.

This is the only section of this publication in which statistics on the Maryland Pharmacy Assistance Program appear. All other statistics in this report are for the Maryland Medical Assistance Program only.

PROGRAM CONTROLS

Efficient administration continues to be a major Medical Assistance Program priority. Over the past years, additional resources have been received for the development and implementation of improved program controls. The effect of these improvements can be examined by looking at the major management control activities of the past year.

Medicaid Quality Control

The Medical Assistance Program reviews over four thousand cases annually to determine the amount of erroneous payments due to:

- Ineligible recipients, or those with understated liability;
- Claims processing errors; or
- Failure to recover third party liability for covered health services.

Individual errors are reported to Program staff for appropriate action and corrective actions are recommended for consideration by Program managers. The implementation of required corrective actions is monitored to measure and assess their effectiveness in reducing erroneous payments.

By the end of fiscal year 1980, statistical data on three review periods had been compiled and two corrective action plans had been prepared and submitted to the Department of Health and Human Services. The 1980 Corrective Action Plan reported on the status of past corrective action implementation and described further initiatives for controlling Medicaid payment errors. Incorporated in the Plan are:

- An administrative handbook for eligibility technicians;
- A provider manual for physicians' services; and
- A procedural manual for health maintenance organization insurance recovery.

Recoveries

The Medical Assistance Program attempts to recover money it has spent for health care services from any source allowed by federal or state law. These sources include tort liability, estates, paternity/child support and insurance. Recovery activities were expanded in fiscal year 1980 with the development of procedures to identify and pursue collections in the areas of assault and workmen's compensation.

Extensive educational programs aimed at hospital staffs and local Departments of Social Services employees were developed and implemented in fiscal year 1980 to increase their awareness of their role in Medical Assistance recoveries activities.

Collections in fiscal year 1980 totalled \$6.7 million, an 86% increase over fiscal year 1979 collections. This figure includes \$3.2 million from legal liability recoveries and \$3.5 million from insurance collections which were initiated in May 1979.

Fraud Investigations

The Medical Assistance Program investigates cases of alleged fraud by Medicaid recipients. The Medicaid Fraud Control Unit, which was established in the Office of the Attorney General in March 1979, handles all cases of alleged provider fraud. Referrals of possible fraud cases come from external sources as well as from regular internal program reviews.

In March, 1980, the Medical Assistance Program organized a Forged and Altered Medicaid Prescription Section which was assigned to the Division of Field Investigation in the Medical Assistance Compliance Administration. Through the end of fiscal year 1980, 72 forged prescription cases were opened and 16 warrants were issued involving 12 individuals.

The following chart shows fraud investigation activities in fiscal year 1980 as compared to fiscal year 1979:

	<u>Fiscal Year 1980</u>	<u>Fiscal Year 1979</u>
Completed Investigations	251	327
Referrals to State's Attorneys	26	21
Successful Prosecutions	11	10
Cases Pending with State's Attorneys	22	19
Cases Pending Investigation	329	282
Fines, Savings and Recoveries	\$247,915	\$555,597

Abuse Investigations

Cases of possible abuse by providers are reviewed and investigated by the Medical Assistance Program. A sample of invoices submitted by providers is reviewed to identify inconsistencies with Program regulations and policies. Many irregularities can be resolved by obtaining additional information through letters to providers requesting clarification or by making on-site visits to a provider's place of business. Cases with implications of abuse are referred to peer groups, to the Commission on Medical Discipline and to Professional Standards Review Organizations. When fraud is suspected, referral is made to the Medicaid Fraud Control Unit in the Office of the Attorney General.

Cases of possible recipient abuse are also investigated by the Program. Recipients that are found to abuse Medical Assistance benefits are counseled and their utilization of services is monitored.

Medicaid Management Information System (MMIS)

The Maryland Medical Assistance Program continued its efforts to install a complex computer-based Medicaid Management Information System (MMIS) in fiscal year 1980. This sophisticated, highly integrated claims processing system will have the capability to:

- reduce erroneous and duplicate payment of bills;
- provide more efficient and accurate processing of invoices;
- assist the Program in its fraud and abuse activities and eliminate possible waste in the Program;
- produce utilization and management review reports.

System development activities were coordinated with the Department of Human Resources so that its Automated Income Maintenance System (AIMS) can pass recipient eligibility data to the MMIS in a completely automated mode. File reconciliation procedures agreed to by the two departments were designed to insure a high degree of data compatibility and reliability.

PROGRAM COMMENT

Trends In Expenditures For Institutional Care

Over the past several years the Medical Assistance Program has experienced an increase in the percentage of its expenditures for the major institutional services: acute general hospital inpatient and outpatient services and nursing facility services. The percentage of Program expenditures for these services increased from 79.0% in fiscal year 1977 to 82.3% in fiscal year 1980. The Program is concerned about the proportion of expenditures for institutional services not only because hospital and nursing facility services are the most expensive modes of health care, but because a major goal of the Program and the Department of Health and Mental Hygiene is to reduce dependence on institutional care by those who can be maintained in or returned to a family or community setting.

The following chart shows the trends in expenditures for the major institutional services over the past several years.

Percentage of Maryland Medical Assistance Program
Payments for Selected Services, FY 77 - 80*

<u>Fiscal Year</u>	<u>Acute General Hospital Inpatient</u>	<u>Nursing Facility</u>	<u>Hospital Outpatient</u>
1977	41.9%	26.8%	10.3%
1978	42.7%	28.2%	10.1%
1979	43.3%	28.9%	10.3%
1980	43.9%	28.1%	10.3%

*Excluding expenditures for HMOs, EPSDT, Medicare Part B Buy-In, General Transportation and Administration.

The percentage of Program expenditures for inpatient services increased each year, from 41.9% in fiscal year 1977 to 43.9% in fiscal year 1980. The percentage of Program expenditures for nursing facility services, after increasing from 26.8% in fiscal year 1977 to 28.9% in fiscal year 1979, dropped to 28.1% in fiscal year 1980. The percentage of expenditures for hospital outpatient services has not changed significantly.

The following tables show the trends of two components of Program expenditures: utilization rate per enrollee and cost per unit of service. Table A shows that the utilization of acute general hospital inpatient services, the Program's most costly service, has been increasing at an accelerating rate since fiscal year 1977. During the same time period utilization of nursing home and outpatient services also increased, but at a decreasing rate.

Table A
Utilization Per Enrollee and Percent Change
For Selected Services, FY 1977 - 80*

<u>Fiscal Year</u>	<u>Acute General Hospital Inpatient</u>	<u>Nursing Facility</u>	<u>Hospital Outpatient</u>
1977	1.28	8.60	1.44
1978	1.33 (+3.9%)	9.63 (+12.0%)	1.59 (+10.4%)
1979	1.42 (+6.8%)	10.45 (+ 8.5%)	1.74 (+ 9.4%)
1980	1.56 (+9.9%)	11.29 (+ 8.0%)	1.86 (+ 6.9%)

*The units of service for acute general hospital inpatient and nursing facility services are days of care. The units of service for hospital outpatient services are visits.

The cost per unit of service for these three services increased each year between fiscal year 1977 and fiscal year 1980. The rate of increase in cost per acute general hospital inpatient service has been decreasing each year. Nursing facility and outpatient services showed the highest rate of increase in cost per service between fiscal years 1978 and 1979. (See Table B.)

Table B
Cost Per Unit of Service and Percent Change
for Selected Services, FY 1977 - 80*

<u>Fiscal Year</u>	<u>Acute General Hospital Inpatient</u>	<u>Nursing Facility</u>	<u>Hospital Outpatient</u>
1977	\$191.10	\$18.62	\$42.70
1978	218.92 (+14.6%)	20.27 (+ 8.9%)	43.97 (+ 3.0%)
1979	245.53 (+12.2%)	22.82 (+12.6%)	48.88 (+11.2%)
1980	269.89 (+ 9.9%)	24.29 (+ 6.4%)	54.09 (+10.7%)

*The units of service for acute general hospital inpatient and nursing facility services are days of care. The units of service for hospital outpatient services are visits.

To a large extent the pattern of Medical Assistance expenditures is a function of the total health care delivery system in Maryland. Therefore the Medical Assistance Program, by itself, cannot reverse the trend toward rapidly increasing inpatient expenditures. The Program will continue to work closely with the Professional Standards Review Organizations, the Health Systems Agencies, and the Health Services Cost Review Commission to control utilization and costs of inpatient hospital services. The Program also will work with other agencies in the Department of Health and Mental Hygiene and with other health-related organizations to encourage the development of alternative methods of delivering health care services.

Recent Court Decisions

Two federal court decisions affected the Program during fiscal year 1980. Fabula v. Buck involved eligibility regulations and the transfer of assets. Kimble v. Buck involved service coverage cutbacks made by the Program in fiscal year 1976.

Transfer of Assets - Maryland regulations prohibited Medical Assistance applicants from transferring assets within three years prior to filing an application for the purposes of becoming eligible for Medical Assistance or circumventing the Program's recovery procedures (COMAR 10.09.01.101). However, on May 21, 1979 the U.S. Court of Appeals, in Fabula v.

Buck, ruled that the regulation could not be enforced. The court said that eligibility requirements for optional coverage groups (medically needy, aged, blind or disabled individuals) cannot be more restrictive than those for Supplemental Security Income recipients. The Social Security Amendment allows an applicant for Supplemental Security Income whose assets exceed that program's eligibility limits to dispose of the excess assets in order to become eligible.

This ruling increased the number of medically needy persons who qualify for Medical Assistance. It also eliminated the possibility of recovering the cost of medical services from the estates of certain deceased recipients.

Reinstatement of Fiscal Year 1976 Service Cutbacks - The Kimble v. Buck case was the result of service coverage cutbacks in the Maryland Medical Assistance Program in fiscal year 1976. The cutbacks were made to keep Program expenditures from exceeding the budget appropriation. Subsequent legal challenges argued that the cutbacks were not properly implemented since Program enrollees did not receive timely and adequate notice of the changes in coverage. On June 5, 1979 the Federal Court of Appeals ordered the Medical Assistance Program to provide a 10-day period during which services would be restored at December 1975 levels for qualifying recipients. To qualify, an individual had to have been an enrollee in December 1975 and in February 1980. Approximately 150,000 people were eligible to receive certain dental, pharmacy, vision and podiatry services and medical supplies.

The total fiscal impact of the 10-day reinstatement of services in February 1980 is difficult to measure. The bills for the reinstated services, other than those which required preauthorization, are identical to regular service bills. Preliminary estimates are that the Program paid up to \$5 million for these services.

TABLES

✓ The following tables, prepared by the Maryland Center for Health Statistics, give further details on the operations and activities of the Maryland Medical Assistance Program. Tables 1 through 6 describe Program enrollees. Tables 7 through 12 give data on the services provided to the enrollees. Tables 13 through 24 provide detailed information on the number and cost of

the services. Table 25 compares certain Program data over a five-year period. The five Appendices include information on selected providers of health care services participating in the Program.

Because many services for persons aged 65 years and older or disabled persons are partially funded by the federal Medicare program, the number of services provided and the expenditures under the Maryland Medical Assistance Program for these persons do not represent the comprehensive health care services they receive. Tables 3, 4 and 6 through 12 reflect only the health care services for those aged 65 years and older paid for by the Program.

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Table 1. Payments by Category Status and Type of Service: 1980 Fiscal Year

Type of Service	AMOUNT PAID				AVERAGE PAYMENT PER ENROLLEE YEAR			
	Total	Category Status			All Enrollees	Category Status		
		Federally Matched		Not		Federally Matched		Not
		Indigent	Medically Indigent	Federally Matched		Indigent	Medically Indigent	Federally Matched
All Services*	\$367,654,693**	\$173,936,145	\$128,680,965	\$65,037,583	\$977	\$645	\$2,855	\$1,055
Hospital Inpatient	169,532,879	93,649,037	30,005,168	45,878,674	451	347	666	745
Comprehensive Care	103,213,195	17,673,081	84,810,957	729,157	274	65	1,882	12
Hospital Outpatient	37,819,979	27,027,479	2,812,940	7,979,560	100	100	62	129
Physician	25,800,272	16,077,664	4,084,135	5,638,473	69	60	91	91
Pharmacy	18,119,414	10,396,467	4,928,490	2,794,457	48	39	109	45
Dental	6,622,081	5,070,048	733,667	818,366	18	19	16	13
Home Health	951,538	645,965	146,118	159,455	2	2	3	3
Special Services	5,595,335	3,396,404	1,159,490	1,039,441	15	13	26	17
Average Enrollment	376,276	269,584	45,069	61,623				

*Does not include premiums paid for buy-in Part B of Medicare; capitation payments for Health Maintenance Organizations; payments for Early and Periodic Screening, Diagnosis and Treatment; or payment for General Transportation Services.

**Includes University Hospital Inpatient, Crippled Children and Mental Retardation Services claimed under Title XIX.

Source of Funds	Dollar Amount	Percent
State	\$216,346,138	58.8
Federal	151,308,555	41.2
Total	367,654,693	100.0

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Table 2. Payments for All Services* and Number of Persons Enrolled
by Political Subdivision of Residence: 1980 Fiscal Year

Political Subdivision of Residence	Payment All Services		Average Number of Persons Enrolled		Average* Payment Per Enrollee Year	Percent of Subdivision's Population Enrolled in Program
	Amount	Percent	Number	Percent		
Maryland State	\$367,654,693	100.0	376,276	100.0	\$ 977	9.0
Baltimore City	183,529,878	49.9	206,350	54.8	889	26.8
Total Counties	184,124,815	50.1	169,926	45.2	1,084	5.0
Allegany	8,343,877	2.3	6,655	1.8	1,254	8.4
Anne Arundel	18,032,788	4.9	19,426	5.2	928	5.2
Baltimore	30,120,688	8.2	22,244	5.9	1,354	3.5
Calvert	3,186,844	0.9	3,397	0.9	938	10.0
Caroline	2,089,030	0.6	2,446	0.7	854	10.6
Carroll	4,061,089	1.1	3,464	0.9	1,172	3.6
Cecil	4,244,313	1.2	4,744	1.3	895	8.3
Charles	5,188,471	1.3	5,749	1.5	902	8.1
Dorchester	3,723,795	1.0	3,706	1.0	1,005	12.0
Frederick	5,184,971	1.3	4,227	1.1	1,227	3.8
Garrett	2,541,486	0.7	2,462	0.7	1,032	9.2
Harford	8,551,631	2.3	8,417	2.2	1,016	5.6
Howard	3,330,348	0.9	2,605	0.7	1,278	2.1
Kent	1,487,841	0.4	1,365	0.4	1,090	8.3
Montgomery	22,273,821	6.1	19,181	5.1	1,161	3.3
Prince George's	36,398,570	9.9	35,562	9.4	1,024	5.4
Queen Anne's	1,871,723	0.5	1,814	0.5	1,032	7.3
St. Mary's	3,183,381	0.9	4,122	1.1	772	7.3
Somerset	2,677,693	0.7	2,555	0.7	1,048	13.0
Talbot	1,709,779	0.5	1,666	0.4	1,026	6.2
Washington	7,340,942	2.0	5,720	1.5	1,283	5.1
Wicomico	6,120,390	1.7	6,103	1.6	1,003	9.8
Worcester	2,461,344	0.7	2,296	0.6	1,072	8.0

*Does not include premiums paid for buy-in Part B of Medicare; capitation payments for Health Maintenance Organizations; payments for Early and Periodic Screening, Diagnosis and Treatment; or payment for General Transportation Services.

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Table 3. Average Number of Persons Enrolled and Payments for All Services¹
by Category of Eligibility: 1980 Fiscal Year

Category of Eligibility	Enrollment		Payments		Average Payment Per Enrollee Year
	Average No. of Persons	Percent of Total	Amount	Percent of Total	
Grand Total - All Categories	376,276	100.0	\$367,654,693	100.0	\$ 977
Indigent Categories	293,072	77.9	206,478,064	56.2	705
Old Age Assistance	19,968	5.3	21,157,557	5.8	1,060
Aid to Families with Dependent Children	216,626	57.6	103,358,553	28.1	477
Public Assistance to the Needy Blind	390	0.1	453,314	0.1	1,162
Aid to the Permanently & Totally Disabled	32,453	8.6	48,844,256	13.3	1,505
Essential Persons	147	*	122,465	*	833
General Public Assistance	23,488	6.3	32,541,919	8.9	1,385
Medically Indigent Categories	83,204	22.1	161,176,629	43.8	1,937
M.A. to Individuals 65 and Over	16,216	4.3	88,913,199	24.2	5,483
M.A. to Eligible Relatives	3,651	1.0	5,594,644	1.5	1,532
M.A. to Individuals Under 21 and in Family	12,073	3.2	13,748,536	3.7	1,139
M.A. to Individuals Under 21 and Not in Family	8,101	2.2	3,662,856	1.0	452
M.A. to the Blind	31	*	62,167	*	2,005
M.A. to the Disabled	4,997	1.3	16,699,563	4.6	3,342
Standard I	37,948	10.1	32,459,514	8.8	855
Subsidized Adoptions	187	*	36,150	*	193

*Less than 0.1 percent

¹ Does not include premiums paid for buy-in Part B of Medicare; capitation payments for Health Maintenance Organizations; payments for Early and Periodic Screening, Diagnosis and Treatment; or payment for General Transportation Services.

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Table 4. Average Enrollment by Age and Sex: 1980 Fiscal Year

<u>Age Group</u>	<u>NUMBER OF PERSONS ENROLLED</u>		
	<u>Total</u>	<u>Male</u>	<u>Female</u>
All Ages	376,276	143,901	232,375
Under 6	59,868	29,826	30,042
6 - 20	132,208	62,028	70,180
21 - 44	100,063	25,715	74,348
45 - 64	42,124	14,742	27,382
65 & Over	42,013	11,590	30,423
	<u>PERCENT ENROLLMENT</u>		
All Ages	100.0	100.0	100.0
Under 6	15.9	20.7	12.9
6 - 20	35.1	43.1	30.2
21 - 44	26.6	17.9	32.0
45 - 64	11.2	10.2	11.8
65 & Over	11.2	8.1	13.1

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Table 5. Average Number of Persons Enrolled and Percent of Population
Enrolled by Race and Area of Residence: 1980 Fiscal Year

<u>Area of Residence</u>	<u>NUMBER OF PERSONS ENROLLED</u>			<u>PERCENT OF AREA'S POPULATION ENROLLED</u>		
	<u>Total</u>	<u>White</u>	<u>Nonwhite</u>	<u>Total</u>	<u>White</u>	<u>Nonwhite</u>
Maryland State	376,276	144,165	232,111	9.0	4.5	23.1
Baltimore City	206,350	43,725	162,625	26.8	12.6	38.4
Total Counties	169,926	100,440	69,486	5.0	3.5	12.0

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Table 6. Average Payment per Enrollee Year for All Services*
by Age, Sex, and Race: 1980 Fiscal Year

<u>Age of Enrollees</u>	<u>All Enrollees</u>	<u>WHITE</u>		<u>NONWHITE</u>	
		<u>Male</u>	<u>Female</u>	<u>Male</u>	<u>Female</u>
All Ages	\$ 977	\$1,106	\$1,485	\$ 727	\$ 768
Under 6	562	598	617	569	508
6 - 20	311	323	421	215	333
21 - 44	981	1,264	958	1,221	852
45 - 64	1,782	2,206	1,889	1,940	1,444
65 & Over	2,847	3,177	3,770	1,979	1,688

*Does not include premiums for buy-in Part B of Medicare; capitation payments for Health Maintenance Organizations; payment for Early and Periodic Screening, Diagnosis and Treatment; or payment for General Transportation Services.

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Table 7. Number of Persons Receiving Service by Type of Service and Age: 1980 Fiscal Year

Type of Service	Total All Ages	Age				
		Under 6	6-20	21-44	45-64	65 & Over
One or More Types of Service*	358,182	54,598	111,460	102,356	44,097	45,671
Hospital Inpatient	68,662	7,821	11,335	24,572	11,316	13,618
Comprehensive Care	15,660	1	6	210	1,343	14,100
Hospital Outpatient	207,039	35,541	62,322	64,348	26,140	18,688
Physician	269,369	40,703	77,439	81,660	35,651	33,916
Pharmacy	249,657	36,999	65,005	75,593	35,603	36,457
Dental	84,733	5,448	44,760	24,305	6,880	3,340
Home Health	1,950	97	87	356	961	449
Special Services	106,928	4,796	27,742	33,303	19,795	21,292

*This line shows the number of persons who received any service or combination of services. It is therefore not the same as the sum of the numbers of persons receiving service by type of service.

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Table 8. Payments by Type of Service and Age: 1980 Fiscal Year

Type of Service	Total All Ages	Age				
		Under 6	6-20	21-44	45-64	65 & Over
Total - All Services*	\$367,654,693	\$33,663,178	\$41,168,330	\$98,151,588	\$75,047,937	\$119,623,660
Hospital Inpatient	169,532,879	24,914,363	22,437,675	63,173,574	44,903,856	14,103,411
Comprehensive Care	103,213,195	165	49,771	1,644,188	9,748,458	91,770,613
Hospital Outpatient	37,819,979	4,845,200	8,365,044	15,357,499	7,435,268	1,816,968
Physician	25,800,272	2,698,876	4,536,078	9,832,776	5,369,282	3,363,260
Pharmacy	18,119,414	785,864	1,558,135	4,333,306	4,753,190	6,688,919
Dental	6,622,081	269,910	3,222,082	2,015,252	770,790	344,047
Home Health	951,538	21,832	19,886	178,293	471,352	260,175
Special Services	5,595,335	126,968	979,659	1,616,700	1,595,741	1,276,267

*Does not include premiums for buy-in Part B of Medicare; capitation payments for Health Maintenance Organizations; payment for Early and Periodic Screening, Diagnosis and Treatment; or payment for General Transportation Services.

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Table 9. Average Payment Per Person Served by Type of Service and Age: 1980 Fiscal Year

Type of Service	Total All Ages	Age				
		Under 6	6-20	21-44	45-64	65 & Over
All Services*	\$ 1,026	\$ 617	\$ 369	\$ 959	\$1,702	\$ 2,619
Hospital Inpatient	2,469	3,186	1,980	2,571	3,968	1,036
Comprehensive Care	6,591	165	8,295	7,829	7,259	6,509
Hospital Outpatient	183	136	134	239	284	97
Physician	96	66	59	120	151	99
Pharmacy	73	21	24	57	134	183
Dental	78	50	72	83	112	103
Home Health	488	225	229	501	490	579
Special Services	52	26	35	49	81	60

*Does not include premiums for buy-in Part B of Medicare; capitation payments for Health Maintenance Organizations; payment for Early and Periodic Screening Diagnosis and Treatment; or payment for General Transportation Services.

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Table 10. Number of Persons Served by Age, Sex and Race (All Services*): 1980 Fiscal Year

<u>Age of Person Receiving Service</u>	<u>All Persons**</u>	<u>White</u>		<u>Nonwhite</u>	
		<u>Male</u>	<u>Female</u>	<u>Male</u>	<u>Female</u>
All Ages	358,182	56,025	96,229	75,287	128,717
Under 6	54,598	10,005	9,862	16,944	17,578
6-20	111,460	19,872	23,475	29,881	37,495
21-44	102,356	11,670	29,052	14,379	46,651
45-64	44,097	7,218	12,864	8,514	15,291
65 & Over	45,671	7,260	20,976	5,569	11,702

*Does not include premiums for buy-in Part B of Medicare; capitation payments for Health Maintenance Organizations; payment for Early and Periodic Screening, Diagnosis and Treatment; or payment for General Transportation Services.

**Includes 1,924 persons of unknown race and sex.

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Table 11. Payments by Age, Sex and Race (All Services*): 1980 Fiscal Year

<u>Age of Person Receiving Service</u>	<u>All Persons**</u>	<u>White</u>		<u>Nonwhite</u>	
		<u>Male</u>	<u>Female</u>	<u>Male</u>	<u>Female</u>
All Ages	\$367,654,693	\$60,584,403	\$132,800,027	\$64,778,916	\$109,753,533
Under 6	33,663,178	6,024,339	6,130,383	11,236,793	10,202,409
6-20	41,168,330	6,769,864	9,796,001	8,829,478	15,617,907
21-44	98,151,588	14,242,893	24,776,640	17,639,744	41,309,931
45-64	75,047,937	13,891,310	22,234,826	16,380,527	22,547,351
65 & Over	119,623,660	19,655,997	69,862,177	10,692,374	20,075,935

*Does not include premiums for buy-in Part B of Medicare; capitation payments for Health Organizations; payment for Early and Periodic Screening, Diagnosis and Treatment; or payment for General Transportation Services.

**Includes a net credit of \$262,186 for persons of unknown race and sex.

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Table 12. Average Payment Per Person Served by Age, Sex and Race (All Services*): 1980 Fiscal Year

<u>Age of Person Receiving Service</u>	<u>All Persons</u>	<u>White</u>		<u>Nonwhite</u>	
		<u>Male</u>	<u>Female</u>	<u>Male</u>	<u>Female</u>
All Ages	\$1,026	\$1,081	\$1,380	\$ 860	\$ 853
Under 6	617	602	662	663	580
6-20	369	341	417	295	417
21-44	959	1,220	853	1,227	886
45-64	1,702	1,925	1,728	1,924	1,475
65 & Over	2,619	2,707	3,331	1,920	1,716

*Does not include premium for buy-in Part B of Medicare; capitation payments for Health Maintenance Organizations; payment for Early and Periodic Screening, Diagnosis and Treatment; or payment for General Transportation Services.

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Table 13. Days of Care and Payment by Hospital:
Hospital Inpatient Program, 1980 Fiscal Year

LOCATION AND NAME OF HOSPITAL	DAYS CARE	PAYMENTS	AVERAGE PER DIEM INTERIM PAYMENT
GENERAL HOSPITALS*			
In Baltimore City			
Baltimore City Hospitals - General	28,269	\$ 7,728,029	\$273.37
Bon Secours	17,228	3,869,963	224.63
Church Hospital	13,112	3,128,511	238.60
Good Samaritan Acute	3,816	849,821	222.70
Johns Hopkins	77,896	24,734,926	317.54
Lutheran	11,646	3,188,754	273.81
Maryland General	19,337	5,765,341	298.15
Mercy	13,125	3,767,363	287.04
North Charles General	6,479	1,553,176	239.72
Provident	20,979	6,325,603	301.52
St. Agnes	13,030	3,059,441	234.80
Sinai	24,170	6,550,501	271.02
South Baltimore General	17,170	4,018,311	234.03
Union Memorial	14,408	4,122,327	286.11
U.S. Public Health Service	2,690	479,922	178.41
University of Maryland	53,569	21,348,923	398.53
TOTAL	336,924	\$100,490,912	\$298.26
In Counties			
Anne Arundel General	7,080	1,478,743	208.86
Baltimore County General	3,068	736,819	240.16
Calvert Memorial	4,939	894,145	181.04
Carroll County General	1,661	248,069	149.35
Clinton Community	2,029	324,742	160.05
Doctor's Hospital of P.G. County	3,787	894,043	236.08
Dorchester General (Cambridge)	6,370	933,159	146.49
Edward McCready Memorial	1,738	289,517	166.58
Eugene Leland Memorial	2,495	552,799	221.56
Fallston General	3,723	900,673	241.92
Franklin Square	10,219	2,465,482	241.26
Frederick Memorial	5,211	830,350	159.35
Frostburg Community (Miner's)	952	133,132	139.84
Garrett County Memorial	1,816	292,872	161.27
Greater Baltimore Medical Center	7,728	1,908,271	246.93
Greater Laurel Beltsville	3,174	851,220	268.19
Harford Memorial	7,916	1,270,633	160.51
Holy Cross	6,062	1,378,273	227.36
Howard County General	2,718	603,498	222.04
Kent & Queen Anne's General	2,887	501,221	173.61
Memorial (Cumberland)	5,121	864,350	168.79
Memorial Hospital at Easton	6,830	1,161,467	170.05
Montgomery General	8,052	1,886,185	234.25
North Arundel	6,787	1,054,478	155.37

MARYLAND MEDICAL ASSISTANCE PROGRAM

Table 13. Hospital Inpatient Program (Continued)

LOCATION AND NAME OF HOSPITAL	DAYS CARE	PAYMENTS	AVERAGE PER DIEM INTERIM PAYMENT
In Counties (Continued)			
Peninsula General	11,775	\$ 2,713,955	\$230.48
Physicians Memorial	4,440	983,640	221.54
Prince George's General	28,931	6,808,533	235.34
Sacred Heart	7,316	1,165,444	159.30
St. Joseph's	4,673	1,048,906	224.46
St. Mary's	2,876	530,709	184.53
Shady Grove Adventist	630	179,575	285.04
Southern Maryland	10,111	2,482,839	245.56
Suburban	4,441	857,710	193.13
Union of Cecil	5,404	971,815	179.83
Washington County	7,583	1,200,514	158.32
Washington Adventist	10,925	2,388,267	218.61
TOTAL	211,468	\$43,786,048	\$207.06
In Washington D.C.			
Capitol Hill	226	\$ 62,857	\$278.13
Children's Hospital	7,853	5,516,755	702.50
Columbia	452	191,168	422.94
D.C. General	38	12,059	317.34
Doctor's	74	24,323	328.69
George Washington	2,352	855,062	363.55
Georgetown University	1,442	708,480	491.32
Greater Southeast Community	6,992	2,023,675	289.43
Hadley Memorial	344	89,046	258.85
Hospital for Sick Children	434	54,268	125.04
Howard University	663	238,046	359.04
Providence	1,454	368,862	253.69
Sibley Memorial	726	156,386	215.41
Washington Hospital Center	3,164	1,455,226	459.93
TOTAL	26,214	\$11,756,213	\$448.47
OTHER OUT OF STATE - TOTAL	10,090	\$ 2,959,098	\$293.27
TOTAL ALL GENERAL HOSPITALS	584,696	\$158,992,271	\$271.92
CHRONIC HOSPITALS			
Baltimore City - Chronic	11,639	\$ 885,597	\$ 76.09
John Deaton	20,377	1,529,024	75.04
Keswick	638	30,194	47.33
Levindale	6,479	769,762	118.81
Prince George's Hospital ECF	5,576	348,861	62.56
TOTAL	44,709	\$3,563,438	\$ 79.70

MARYLAND MEDICAL ASSISTANCE PROGRAM
Table 13. Hospital Inpatient Program (Continued)

LOCATION AND NAME OF HOSPITAL	DAYS CARE	PAYMENTS	AVERAGE PER DIEM INTERIM PAYMENT
<u>CHILDREN'S FACILITIES</u>			
Children's Hospital	2,148	\$ 343,295	\$159.82
John F. Kennedy Institute	4,094	926,502	226.31
James Kernan	2,902	571,218	196.84
Mt. Washington Pediatric Hospital	14,042	2,282,333	162.54
TOTAL	23,186	\$ 4,123,348	177.84
<u>SPECIAL PAYMENTS</u>			
Kidney Disease Program	1,152	\$ 484,819	\$420.85
LESS DIRECT, THIRD PARTY RECOVERIES	-	\$ 1,362,006	\$ -
GRAND TOTAL	653,743	\$165,801,870	\$253.62
Medicare - Inpatient Deductibles, Coinsurance, etc.		\$+3,731,009	
		\$169,532,879	

*Includes payments for Crippled Children Services.

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
MARYLAND MEDICAL ASSISTANCE PROGRAM

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Table 14. Days of Care and Amount Paid by Location and Name of Home:
Comprehensive Care Program, 1980 Fiscal Year

LOCATION AND NAME OF HOME	DAYS CARE	PAYMENTS
<u>Allegany County</u>		
Allegany County Infirmary	23,018	\$ 609,865
Cumberland Nursing & Convalescent Center	19,208	349,037
Egle Nursing Home	5,921	145,696
Frostburg Villa Nursing Home of Allegany County	49,676	1,316,189
Lions Manor Nursing Home	23,201	588,887
TOTAL ALLEGANY COUNTY - 5 HOMES	121,024	\$3,009,674
<u>Anne Arundel County</u>		
Annapolis Convalescent Center	9,635	\$ 227,318
Bay Manor Nursing Home	25,877	689,414
Crofton Convalescent Center	5,070	154,851
Fairfield Nursing Center	28,189	667,779
Hammonds Lane Nursing Center	14,195	345,928
Knollwood Manor	29,373	762,309
Maryland Manor of Glen Burnie	32,203	767,382
North Arundel Nursing & Convalescent Center	18,514	461,396
Plaza Manor Convalescent Home	38,613	839,248
TOTAL ANNE ARUNDEL COUNTY - 9 HOMES	201,669	\$4,915,625
<u>Baltimore County</u>		
Armacost Nursing Home	12,021	\$ 303,998
Augsburg Lutheran Home	19,334	449,637
Bent Nursing Home	17,957	494,463
Chapel Hill Convalescent Home	12,547	306,557
Dulaney Towson Nursing Home	18,057	430,114
Forest Haven Nursing Home	53,751	996,413
Frederick Villa Nursing Center	23,951	522,551
Garrison Valley Center	27,688	683,422
Holly Hill Manor	1,577	30,697
House in the Pines - Catonsville	33,088	772,580
Hurwitz House	5,425	96,417
Ivy Hall Nursing & Convalescent Home	4,493	101,693
Little Sisters of the Poor	35,977	926,070
Manor Care - Rossville	40,982	943,497
Manor Care - Ruxton	28,499	699,345
Manor Care - Towson	6,929	170,494
Milford Manor Nursing	6,168	134,618
Old Court Nursing Center	19,077	512,407
Perring Parkway Nursing Home	14,770	323,682
Pickersgill	29,210	648,643
Pikesville Convalescent Home	34,809	900,373
Randallstown Nursing Home	54,042	1,308,971
Ridgeway Manor	15,984	436,892
Riverview Nursing Centre	72,854	1,888,996
St. Joseph Nursing Home	6,531	162,739
Shady Nook Home	8,505	203,230
Shangri-La Nursing Center	21,875	472,277

MARYLAND MEDICAL ASSISTANCE PROGRAM

Table 14. Days of Care and Amount Paid by Location and Name of Home:
Comprehensive Care Program, 1980 Fiscal Year (Cont'd)

LOCATION AND NAME OF HOME	DAYS CARE	PAYMENTS
<u>Baltimore County (Continued)</u>		
Stella Maris Hospice	75,862	\$1,843,377
Summit Nursing Home	8,654	214,093
Valley View Nursing Home	29,230	663,076
TOTAL BALTIMORE COUNTY - 30 HOMES	739,847	\$17,641,322
<u>Calvert County</u>		
Calvert County Nursing Center	18,942	\$ 513,413
Calvert House	11,602	253,523
TOTAL CALVERT COUNTY - 2 HOMES	30,544	\$ 766,936
<u>Caroline County</u>		
Caroline Nursing Home	9,695	\$ 244,810
TOTAL CAROLINE COUNTY - 1 HOME	9,695	\$ 244,810
<u>Carroll County</u>		
Golden Age Guest Home	5,977	\$ 128,755
Long View Nursing Home	8,952	241,160
Pleasant View Nursing Home	37,489	1,059,588
Sykesville Eldercare Center	21,198	513,525
Westminster Nursing & Convalescent Center	26,841	553,761
TOTAL CARROLL COUNTY - 5 HOMES	100,457	\$2,496,789
<u>Cecil County</u>		
Calvert Manor Nursing Home	9,692	\$ 207,249
Devine Haven Convalescent Home	9,705	197,775
Laurelwood Nursing Center	31,666	819,351
TOTAL CECIL COUNTY - 3 HOMES	51,063	\$1,224,375
<u>Charles County</u>		
Charles County Nursing Home	26,233	\$ 697,936
TOTAL CHARLES COUNTY - 1 HOME	26,233	\$ 697,936
<u>Dorchester County</u>		
Cambridge House	48,178	\$1,231,378
Glasgow Nursing Home	9,618	209,605
TOTAL DORCHESTER COUNTY - 2 HOMES	57,796	\$1,440,983
<u>Frederick County</u>		
Citizens Nursing Home of Frederick County	37,883	\$ 996,965
Frederick Nursing & Convalescent Center	17,307	399,424
Homewood Retirement Center	2,276	63,659
Vindabona Nursing Home	10,380	208,976
TOTAL FREDERICK COUNTY - 4 HOMES	67,846	\$1,669,024
<u>Garrett County</u>		
Cuppett & Weeks Nursing Home	46,418	\$1,072,923
Dennett Road Manor	21,729	612,876
Goodwill Mennonite Home	14,990	366,855
TOTAL GARRETT COUNTY - 3 HOMES	83,137	\$2,052,654

MARYLAND MEDICAL ASSISTANCE PROGRAM

Table 14. Days of Care and Amount Paid by Location and Name of Home:
Comprehensive Care Program, 1980 Fiscal Year (Cont'd)

LOCATION AND NAME OF HOME	DAYS CARE	PAYMENTS
<u>Harford County</u>		
Belair Convalescent Center	18,518	\$ 447,228
Brevin Nursing Home	13,911	390,964
Citizens Nursing Home	48,186	1,284,619
Fallston Nursing Center	6,471	133,850
TOTAL HARFORD COUNTY - 4 HOMES	87,086	\$2,256,661
<u>Howard County</u>		
Lorien Nursing & Convalescent Home	2,562	\$ 62,166
TOTAL HOWARD COUNTY - 1 HOME	2,562	\$ 62,166
<u>Kent County</u>		
Magnolia Hall	3,319	\$ 91,400
TOTAL KENT COUNTY - 1 HOME	3,319	\$ 91,400
<u>Montgomery County</u>		
Bel Pre Health Care Center	13,808	\$ 348,118
Bethesda Health Center	59,983	1,551,354
Brooke Grove Nursing Home	10,981	220,425
Circle Manor Nursing Home	27,491	645,557
Chevy Chase Nursing & Convalescent Home	7,874	195,576
Collingswood Nursing Center	20,850	476,642
Colonial View Nursing Home	4,450	95,340
Fairland Nursing Home	9,561	240,945
Friends House Nursing Home	3,892	97,419
Hebrew Home of Greater Washington	65,117	1,585,699
Herman M. Wilson Health Care Center	32,365	774,461
Kensington Gardens	40,941	1,006,961
Manor Care - Wheaton	2,060	38,614
Potomac Valley Nursing Home	18,007	416,505
Randolph Hills Nursing Home	12,406	276,934
Rockville Nursing Home	9,658	251,134
Sharon Nursing Home	4,896	115,069
Sligo Gardens	3,978	84,062
Sylvan Manor Health Care Center	8,014	211,123
University Nursing Home	24,319	619,199
TOTAL MONTGOMERY COUNTY - 20 HOMES	380,651	\$9,251,137
<u>Prince George's County</u>		
American	1,216	\$ 28,432
Carroll Manor	18,980	392,871
Clinton Convalescent Center	71,495	1,695,548
Greenbelt Convalescent Center	30,489	749,730
Hillhaven Nursing Home	469	10,941
Madison Manor Nursing Convalescent Home	9,577	263,737
Magnolia Gardens Nursing Home	17,750	441,292
Manor Care - Adelphi	57,913	1,385,195
Manor Care - Hyattsville	22,467	498,971

MARYLAND MEDICAL ASSISTANCE PROGRAM

Table 14. Days of Care and Amount Paid by Location and Name of Home:
Comprehensive Care Program, 1980 Fiscal Year (Cont'd)

LOCATION AND NAME OF HOME	DAYS CARE	PAYMENTS
<u>Prince George's County (Continued)</u>		
Manor Care - Largo	12,133	\$ 311,796
Prince George's Nursing Care Center	22,944	568,664
Regency Nursing Center	12,827	258,795
Sacred Heart Home	12,606	255,897
Suitland Nursing Home	9,592	253,591
TOTAL PRINCE GEORGE'S COUNTY - 14 HOMES	300,458	\$7,115,460
<u>Queen Anne's County</u>		
Corsica Hills Nursing Center	32,144	\$ 848,264
TOTAL QUEEN ANNE'S COUNTY - 1 HOME	32,144	\$ 848,264
<u>St. Mary's County</u>		
St. Mary's Nursing Home	15,367	\$ 437,903
TOTAL ST. MARY'S COUNTY - 1 HOME	15,367	\$ 437,903
<u>Somerset County</u>		
Alice Byrd Tawes Nursing Home	20,728	\$ 567,041
TOTAL SOMERSET COUNTY - 1 HOME	20,728	\$ 567,041
<u>Talbot County</u>		
Easton Memorial	3,032	\$ 72,047
House in the Pines - Easton	19,130	\$ 425,134
TOTAL TALBOT COUNTY - 2 HOMES	22,162	\$ 497,181
<u>Washington County</u>		
Avalon Manor	53,260	\$1,046,905
Coffman Home for the Aging	16,951	447,654
Colton Villa Nursing Center	37,815	851,482
Fahrney Keedy Memorial Home for the Aged	13,543	313,239
Garlock Memorial Convalescent Center	11,785	286,285
Homewood Retirement Center	16,339	314,797
Ravenwood Lutheran Village Nursing Home	14,563	368,196
Reeder Memorial Home	41,109	1,039,991
Williamsport Nursing Home	26,157	596,088
TOTAL WASHINGTON COUNTY - 9 HOMES	231,522	\$5,264,637
<u>Wicomico County</u>		
Riverwalk Manor	48,148	\$1,322,481
Salisbury Nursing Home	62,350	1,283,150
Wicomico	20,156	528,006
TOTAL WICOMICO COUNTY - 3 HOMES	130,654	\$3,133,637
<u>Worcester County</u>		
Harrison House	9,391	\$ 251,486
Hartley Hall	11,210	325,584
TOTAL WORCESTER COUNTY - 2 HOMES	20,601	\$ 577,070

Table 14. Days of Care and Amount Paid by Location and Name of Home:
Comprehensive Care Program, 1980 Fiscal Year (Cont'd)

LOCATION AND NAME OF HOME	DAYS CARE	PAYMENTS
<u>Baltimore City</u>		
Ardleigh Nursing Home	10,655	\$ 236,635
Ashburton Nursing Home	13,521	375,418
Baltimore City Hospital	48,845	1,286,496
Belair Convalesarium	67,804	1,726,743
Caton Manor Nursing Center	57,605	1,264,752
Century Home	30,253	868,702
Crawford Retreat	7,054	207,852
Dukeland Nursing Home	37,617	1,012,118
Edgewood Nursing Home	20,652	473,758
Federal Hill Nursing Home	112,689	3,111,380
Friedlers Guest House	10,985	285,023
Garrison Nursing Home	7,379	196,079
Granada Nursing Home	40,377	1,030,743
Greater Pennsylvania Avenue Nursing Home	45,056	1,280,398
Greenwood Acres Nursing Home	8,145	245,174
Hamilton Nursing Home	21,643	522,019
Harford Gardens Convalescent Center	20,952	562,996
Haven Nursing Home	7,321	183,066
Hayes Care Home	3,796	79,867
House in the Pines - Bel Air	25,096	576,745
House in the Pines - Belvedere	56,968	1,371,150
Jenkins Memorial	34,205	836,127
Jewish Convalescent & Nursing Home	29,133	769,997
John L. Deaton Nursing Home	42,411	1,094,685
Kenesaw Nursing Home	9,869	250,854
Kenson Nursing Home	13,369	347,903
Keswick Home	30,444	735,341
Key Circle Hospice	45,134	1,215,500
Lake Drive Nursing Home	18,147	515,895
Lafayette Square Nursing Center	93,788	2,486,371
Levindale Home	69,143	1,813,823
Lincoln Convalescent Center	82,039	2,475,375
Long Green Nursing Center	4,748	82,249
Maryland Baptist Aged Home	14,567	314,916
Melchor Nursing Home	17,595	507,121
Midtown Home	50,468	1,357,357
Mt. Sinai Nursing Home	20,762	558,913
Park Hill Convalescent	17,621	478,355
Pleasant Manor Nursing Home	43,650	1,054,153
Poplar Manor Nursing Home	53,212	1,455,935
Seton Hill Manor	102,718	2,343,688
TOTAL BALTIMORE CITY - 41 HOMES	1,447,436	\$37,591,672
TOTAL OUT OF STATE - 8 HOMES	71,627	\$1,696,300
GRAND TOTAL - 173 HOMES	4,255,628	\$105,550,657
Less Direct, Third Party Recoveries	5,827	\$1,096,579
Less Advanced Payments	-	\$1,240,883
NET TOTAL	4,249,801	\$103,213,195

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
MARYLAND MEDICAL ASSISTANCE PROGRAM

Table 15. Number of Visits and Payments by Type of Service, by Hospital,
Hospital Outpatient Program, 1980 Fiscal Year

Location and Name of Hospital	Number of Visits			AMOUNT PAID					
	Total	Outpatient Clinic	Emergency Room	Grand Total	For Visits			Ancillary Services	Medicare Ded. & Coins
					Total	Outpatient Clinic	Emergency Room		
Grand Total - All Hospitals	699,156	386,714*	199,458*	\$37,819,979	\$19,054,253	\$12,357,350*	\$6,696,903*	\$16,952,423	\$1,813,303
Gen. Hospitals in Balto. City	532,588	317,499*	102,105*	26,605,257	14,723,763	6,655,104*	3,787,390*	10,979,499	901,995
Baltimore City Hospital	40,754	34,185	6,569	1,634,819	824,774	681,512	143,262	763,754	46,292
Bon Secours	18,909	12,635	6,274	1,111,894	667,805	175,544	492,262	398,218	45,871
Church Hospital	14,075	7,354	6,721	784,031	431,661	129,004	302,658	327,993	24,378
Good Samaritan	980	980	-	74,494	20,885	20,885	-	46,304	7,306
Johns Hopkins	112,984	N.A.	N.A.	7,730,660	4,281,269	N.A.	N.A.	3,157,906	291,486
Comprehensive Child Care	33,293	33,293	-	998,790	998,790	998,790	-	-	-
Lutheran	11,490	7,039	4,451	554,617	344,577	134,908	209,669	178,991	31,049
Maryland General	16,279	10,298	5,981	1,164,207	476,389	170,906	305,483	629,760	58,058
Mercy	33,226	25,812	7,414	1,247,512	639,211	428,803	210,408	538,785	69,516
North Charles General	12,386	12,386	-	522,044	367,799	367,799	-	126,323	27,922
Provident	17,134	7,320	9,814	1,545,333	594,564	181,790	408,774	914,465	36,305
Provident-Druid Child & Youth Development Center	10,124	10,124	-	302,631	302,631	302,631	-	-	-
St. Agnes	12,627	3,916	8,711	673,611	340,369	116,798	223,570	305,339	27,903
Sinai	45,218	29,569	15,649	1,766,695	708,570	370,186	338,384	989,612	68,513
South Baltimore	21,097	11,163	9,934	853,786	391,017	140,920	250,097	444,964	17,805
Union Memorial	23,371	14,793	8,578	1,544,665	801,925	354,872	447,053	697,854	44,886
University	97,731	85,722	12,009	3,767,532	2,203,596	1,747,825	455,770	1,459,231	104,705
Community Ped. Center	10,716	10,716	-	321,480	321,480	321,480	-	-	-
U.S. Public Health	194	194	-	6,451	6,451	6,451	-	-	-
General Hospitals in Counties	148,263	56,568	91,695	8,595,939	3,841,780	1,216,543	2,625,237	4,122,467	631,692
Anne Arundel	6,589	59	6,530	299,875	183,770	(1,072)	184,841	110,035	6,071
Baltimore County General	1,302	7	1,295	97,031	45,232	211	45,021	42,141	9,659
Calvert Memorial	1,309	164	1,145	130,814	48,428	2,183	46,246	75,777	6,608
Carroll County General	882	-	882	67,721	29,528	-	29,528	32,996	5,197
Clinton Community	504	14	490	22,501	4,928	173	4,755	16,666	907
Doctor's Hospital of P.G.Co.	1,302	15	1,287	71,599	44,229	611	43,618	25,443	1,927

MARYLAND MEDICAL ASSISTANCE PROGRAM

Table 15. Hospital Outpatient Program, 1980 Fiscal Year (Continued)

Location and Name of Hospital	Number of Visits			AMOUNT PAID					
	Total	Outpatient Emergency		Grand Total	Total	For Visits		Ancillary Services	Medicare Ded. & Coins
		Clinic	Room			Outpatient Clinic	Emergency Room		
General Hosp. in Co.(Cont'd)									
Dorchester Gen.(Cumberland)	1,980	48	1,932	\$ 161,505	\$ 71,861	\$ 430	\$ 71,432	\$ 62,983	\$ 26,660
Edward McCready Memorial	661	321	340	54,585	19,574	5,211	14,363	24,572	10,439
Eugene Leland Memorial	1,190	16	1,174	125,694	42,817	525	42,292	78,073	4,804
Fallston General	1,924	749	1,175	151,862	51,549	13,183	38,366	92,379	7,934
Franklin Square	10,950	8,405	2,545	627,196	270,447	182,328	96,119	323,584	25,166
Frederick Memorial	1,751	-	1,751	120,139	50,706	(17)	58,722	51,730	9,702
Frostburg Community	924	-	924	50,529	23,588	-	23,588	19,206	7,735
Garrett County Memorial	1,346	20	1,326	81,975	39,270	402	38,868	31,086	11,619
Greater Laurel Beltsville	1,362	-	1,362	111,402	37,216	-	37,216	72,171	2,016
Greater Baltimore Medical Center**	25,719	23,766	1,953	861,598	519,025	459,958	59,067	323,950	18,623
Harford Memorial	3,910	109	3,801	323,310	156,302	9,801	146,501	148,361	18,648
Holy Cross	3,702	1,204	2,498	314,196	149,754	74,939	74,815	158,388	6,054
Howard County General	882	29	853	93,854	38,316	432	37,885	2,311	53,228
Kent & Queen Anne's General	1,166	9	1,157	78,252	30,342	442	29,901	34,995	12,914
Memorial (Cumberland)	7,644	3	7,641	268,641	142,255	117	142,139	108,216	18,170
Memorial Hospital at Easton	2,853	289	2,564	216,801	86,518	3,765	82,753	121,399	8,885
Montgomery General	2,386	688	1,698	216,454	103,653	45,174	58,478	104,803	7,999
North Arundel	2,988	-	2,988	206,286	78,897	(435)	79,332	115,814	11,575
Peninsula General	8,060	3,338	4,722	573,642	253,168	63,546	189,623	260,117	60,357
Physician Memorial	4,913	11	4,902	272,857	194,089	1,234	92,855	161,918	16,851
Prince George's General	24,551	9,882	14,669	1,273,767	924,007	195,671	328,335	723,973	25,787
Sacred Heart	2,440	-	2,440	178,210	67,414	-	67,414	93,294	17,502
St. Joseph's	4,166	2,618	1,548	172,839	75,508	35,684	39,914	88,156	9,086
St. Mary's	1,712	-	1,712	131,026	57,432	-	57,432	62,458	11,136
Shady Grove Adventist	518	-	518	43,214	19,358	-	19,358	23,856	-
Southern Maryland	1,904	471	1,433	211,371	70,572	18,512	52,060	5,797	135,002
Suburban	1,250	279	971	107,554	34,577	9,874	24,702	64,584	8,393
Union Hospital of Cecil	2,359	76	2,283	205,779	49,046	500	48,546	141,224	15,509
Washington Adventist	7,744	3,959	3,785	467,258	245,308	92,894	152,415	206,350	15,600
Washington County	3,420	19	3,401	204,594	67,004	267	66,737	113,661	23,929

MARYLAND MEDICAL ASSISTANCE PROGRAM

Table 15. Hospital Outpatient Program, 1980 Fiscal Year (Continued)

Location and Name of Hospital	Number of Visits			AMOUNT PAID					
	Total	Outpatient Clinic	Emergency Room	Grand Total	For Visits			Ancillary Services	Ded. & Coins
					Total	Outpatient Clinic	Emergency Room		
Special Hospitals & Independent Clinics	6,120	6,119	1	\$ 142,377	\$ 76,690	\$ 76,860	\$ (170)	\$ 59,298	\$ 6,389
Balto. City Health Dept. Child & Youth Project	1,910	1,910	-	17,849	17,849	17,849	-	-	-
Balto. City Hosp. Chronic Children's Hospital	-	-	-	839	-	-	-	-	839
CPPA CC&Y Project	280	280	-	11,641	4,002	4,188	(186)	7,374	265
James L. Kernan	1,194	1,194	-	28,890	28,860	28,860	-	30	-
John F. Kennedy Inst.	2,736	2,735	1	70,424	25,978	25,962	16	44,257	190
Levindale Hebrew Home	-	-	-	185	-	-	-	185	-
Mt. Washington Pediatric Hospital	-	-	-	3,689	-	-	-	-	3,689
Prince George's Hospital ECF	-	-	-	7,452	-	-	-	7,452	-
	-	-	-	1,415	-	-	-	-	1,415
Out of State Hospitals	11,937	6,280	5,657	1,204,520	474,537	187,483	287,054	855,961	(125,978)
Special Payments: Kidney Disease Program	248	248	-	1,369,657	2,717	2,717	-	951,848	415,092
Direct, Third Party Recoveries	-	-	-	(97,771)	(65,234)	(62,626)	(2,608)	(16,650)	(15,887)

* Incomplete, no breakdown for Johns Hopkins

**Includes services rendered at facility in Baltimore City

N.A. Not available

() Credit Balance

Due to rounding, columns and rows may not sum to total.

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
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Table 16. Payments for Physician Service Rendered in
the Office, Home, or Nursing Home by Type of Service:
Program for Physician Service in the Office, Home
and Nursing Home, 1980 Fiscal Year

<u>Type of Service</u>	<u>Payment</u>	<u>Percent</u>
Total	\$12,001,431	100.0
Visits	6,108,114	50.9
Consultation	413,031	3.4
Ophthalmology	87,493	0.7
Laboratory	873,893	7.3
X-Ray, EKG, EEG	436,456	3.6
Dispensed Drugs	151,873	1.3
Family Planning Clinics	841,509	7.0
Drug Addiction Clinics	545,223	4.5
Mental Health Clinics	259,436	2.2
Other Specified Services	846,819	7.1
Medicare Deductible and Coinsurance	1,437,584	12.0

PHYSICIAN VISITS

	<u>Number</u>	<u>Percent</u>
Total	703,753	100.0
Office	690,546	98.1
Home, Day	2,357	0.4
Home, Night	180	*
Nursing Home	10,670	1.5

* Less than 0.1 percent

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Table 17. Payments for Physician Service Rendered in the Hospital by Type of Service and Type of Patient: Program for Physician Service in Hospital*, 1980 Fiscal Year

Type of Service	Total		TYPE OF PATIENT		
	Amount	Percent	Inpatient	Outpatient	Emergency Room
Total	\$13,797,687	100.0	\$11,343,989	\$1,795,389	\$658,309
Attending Physician	2,962,967	21.5	2,296,425	419,042	247,500
Surgery	6,271,916	45.5	5,500,578	582,898	188,440
Anesthesiology	866,730	6.3	816,645	48,872	1,213
Consultation	370,525	2.7	334,323	21,887	14,315
Supervision	14,007	0.1	13,943	64	-
Radiology	1,252,928	9.1	573,799	477,969	201,160
Pathology	73,236	0.5	50,244	17,311	5,681
Medicare Deductible & Coinsurance	1,911,274	13.8	1,688,905	222,369	-
Medicare-No Part B	74,104	0.5	69,127	4,977	-

*Does not include: \$1,154 paid for the Medicare No Part B Professional Component in Extended Care Facilities.

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Table 18. Payments for Physician Service and Number of Physician Accounts
(Individuals, Groups and Special Clinics) by Location of Provider: 1980 Fiscal Year

Location of Provider	PAYMENTS		PHYSICIAN ACCOUNTS		NUMBER OF PHYSICIAN ACCOUNTS IN PAYMENT GROUP						
	Amount	Percent of Total	Number	Percent of Total	Under \$100	\$100-\$999	\$1,000-\$4,999	\$5,000-\$9,999	\$10,000-\$19,999	\$20,000-\$29,999	\$30,000 And Over
Grand Total	\$25,800,272	100.0	5,743	100.0	1,169	1,572	1,730	660	379	110	123
Baltimore City	10,293,997	39.9	1,434	25.0	212	407	438	157	109	43	68
Total Counties	14,657,441	56.8	3,317	57.7	472	792	1,188	485	262	65	53
Allegany	523,422	2.0	106	1.9	11	16	46	19	11	2	1
Anne Arundel	1,384,054	5.4	283	4.9	28	52	121	43	27	9	3
Baltimore	2,932,116	11.4	697	12.1	100	213	221	84	55	12	12
Calvert	306,298	1.2	31	0.5	2	3	7	10	5	3	1
Caroline	56,966	0.2	7	0.1	1	-	2	1	3	-	-
Carroll	302,325	1.2	70	1.2	7	6	39	13	2	2	1
Cecil	280,255	1.1	36	0.6	4	3	8	11	7	2	1
Charles	334,734	1.3	38	0.7	7	3	5	9	12	-	2
Dorchester	315,230	1.2	33	0.6	2	5	6	10	6	2	2
Frederick	372,546	1.4	91	1.6	12	9	46	16	7	1	-
Garrett	128,827	0.5	18	0.3	3	1	3	5	6	-	-
Harford	772,057	3.0	130	2.3	18	21	35	34	15	4	3
Howard	409,093	1.6	93	1.6	11	25	35	10	7	2	3
Kent	157,275	0.6	26	0.4	1	4	10	5	5	1	-
Montgomery	1,870,992	7.3	736	12.8	114	233	302	53	25	6	3
Prince George's	2,403,423	9.3	578	10.1	118	156	169	77	36	9	13
Queen Anne's	34,580	0.1	7	0.1	1	-	4	1	1	-	-
St. Mary's	263,477	1.0	31	0.5	3	3	7	10	4	3	1
Somerset	125,683	0.5	11	0.2	-	-	3	3	3	2	-
Talbot	429,388	1.7	61	1.1	6	6	21	18	6	2	2
Washington	487,620	1.9	107	1.9	12	18	48	17	9	1	2
Wicomico	707,178	2.7	114	2.0	10	12	45	33	9	2	3
Worcester	59,902	0.2	13	0.2	1	3	5	3	1	-	-
Out-of-State	848,834	3.3	992	17.3	485	373	104	18	8	2	2

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
MARYLAND MEDICAL ASSISTANCE PROGRAM

Table 19. Number of Invoices and Payments by Type of Invoice:
Pharmacy Program, 1980 Fiscal Year

	<u>Number of Invoices</u>	<u>Payments*</u>	<u>Average Payment Per Invoice</u>
Total	2,441,939	\$18,119,414	\$7.42
Legend	2,383,856	17,639,166	7.40
Over-the-Counter	58,083	480,248	8.27
Drugs	38,433	353,540	9.20
Medical Supplies	19,650	126,708	6.45

*These payments do not include the 50¢ co-payment required of recipients for drug items.

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Table 20. Payments for Pharmacy Service and Number of Participating
Pharmacies (Proprietary and Institutional) by Location of Pharmacy: 1980 Fiscal Year

Location of Pharmacy	PAYMENTS		PHARMACIES		NUMBER OF PHARMACIES IN PAYMENT GROUP					
	Amount	Percent of Total	Number	Percent of Total	Under \$1,000	\$1,000- \$4,999	\$5,000- \$9,999	\$10,000- \$19,999	\$20,000- \$49,999	\$50,000 & over
Grand Total	\$18,119,414	100.0	961	100.0	197	189	163	168	159	85
Baltimore City	7,738,636	42.7	184	19.2	24	14	22	28	46	50
Total Counties	9,820,503	54.2	623	64.8	64	155	131	135	106	32
Allegany	397,503	2.2	20	2.1	4	1	-	8	6	1
Anne Arundel	806,316	4.4	54	5.6	6	12	11	11	12	2
Baltimore	2,427,912	13.4	156	16.2	13	58	35	25	17	8
Calvert	146,211	0.8	4	0.4	1	-	-	1	1	1
Caroline	188,862	1.0	6	0.6	-	1	-	2	2	1
Carroll	249,228	1.4	16	1.7	-	2	3	8	3	-
Cecil	223,150	1.2	7	0.7	1	-	-	2	3	1
Charles	211,452	1.2	8	0.8	-	1	-	2	5	-
Dorchester	229,146	1.3	7	0.7	1	-	-	1	4	1
Frederick	227,708	1.3	18	1.9	2	5	5	1	5	-
Garrett	180,089	1.0	6	0.6	1	-	-	2	1	2
Harford	424,275	2.3	28	3.0	1	7	5	5	5	1
Howard	107,992	0.6	16	1.7	3	2	8	3	-	-
Kent	109,691	0.6	3	0.3	-	-	-	1	1	1
Montgomery	950,654	5.2	91	9.5	11	31	23	17	6	3
Prince Georges	1,421,565	7.8	117	12.2	11	26	31	29	17	3
Queen Annes	75,231	0.4	3	0.3	-	-	1	1	2	-
St. Marys	136,428	0.8	5	0.5	-	1	-	3	1	1
Somerset	154,639	0.9	6	0.6	-	-	-	3	3	-
Talbot	105,893	0.6	6	0.6	-	2	-	2	2	1
Washington	579,876	3.2	20	2.1	3	2	4	3	5	3
Wicomico	358,399	2.0	14	1.5	3	-	3	3	2	3
Worcester	108,283	0.6	12	1.2	3	4	2	-	3	-
Out-of-State	560,275	3.1	154	16.0	109	20	10	5	7	3

MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
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Table 21. Payments for Dental Service by Type of Service and Location of Dentist or Clinic: 1980 Fiscal Year

Location of Provider	Total	Percent of Total	Type of Service							Prosthodontic Service as a Percent of Total Payments
			Diagnostic	Preventive	Restorative	Endo/ Periodontic	Prosthodontic	Oral Surgery	Other Services	
Grand Total	\$6,622,081	100.0	\$905,511	\$807,458	\$1,786,919	\$438,165	\$1,177,721	\$851,262	\$655,045	17.8
Baltimore City	3,069,379	46.3	437,543	342,522	663,083	191,924	681,988	388,117	364,202	22.2
Total Counties	3,514,248	53.1	461,552	459,720	1,110,882	243,496	491,953	456,431	290,214	14.0
Allegany	145,004	2.2	16,642	20,600	51,204	8,820	16,871	14,309	16,558	11.6
Anne Arundel	399,669	6.0	51,233	51,540	122,221	33,812	56,853	47,482	36,528	14.2
Baltimore	651,906	9.9	88,044	85,152	192,794	45,447	102,248	68,528	69,693	15.7
Calvert	24,819	0.4	5,441	3,059	5,267	276	819	7,764	2,193	3.3
Caroline	21,133	0.3	3,274	2,789	8,647	1,345	1,403	2,562	1,113	6.6
Carroll	50,043	0.8	5,959	7,724	21,628	2,425	2,922	4,726	4,659	5.8
Cecil	61,525	0.9	6,564	7,176	17,766	3,690	13,408	6,825	6,096	21.8
Charles	84,909	1.3	9,670	9,080	29,348	6,135	14,533	5,092	11,051	17.1
Dorchester	60,127	0.9	8,283	5,681	12,312	2,957	13,108	14,430	3,356	21.8
Frederick	46,103	0.7	3,771	6,352	13,825	2,855	6,629	11,497	1,174	14.4
Garrett	40,715	0.6	4,090	5,993	15,175	2,075	5,725	4,921	2,736	14.1
Harford	249,719	3.8	36,751	32,061	73,523	20,177	39,216	25,340	22,651	15.7
Howard	48,729	0.7	5,406	5,885	17,167	5,301	5,321	5,389	4,260	10.9
Kent	31,666	0.5	2,141	4,569	9,478	978	5,818	6,862	1,820	18.4
Montgomery	446,747	6.8	56,241	50,227	165,211	47,203	44,348	50,261	33,256	9.9
Prince George's	538,889	8.1	72,049	73,183	171,152	35,751	57,505	88,027	41,222	10.7
Queen Anne's	8,641	0.1	824	1,711	1,401	310	1,271	2,045	1,079	14.7
St. Mary's	114,641	1.7	16,897	15,930	33,761	6,802	20,352	15,603	5,296	17.8
Somerset	18,201	0.3	2,522	1,925	4,842	771	5,368	1,573	1,200	29.5
Talbot	65,862	1.0	8,261	10,594	25,378	1,730	11,199	7,730	970	17.0
Washington	98,444	1.5	12,055	13,462	26,744	2,901	47,014	19,729	6,539	17.3
Wicomico	277,721	4.2	41,373	41,035	81,164	10,510	46,269	42,085	15,285	16.7
Worcester	29,035	0.4	4,061	3,992	10,874	1,225	3,753	3,651	1,479	12.9
Out-of-State	38,454	0.6	6,416	5,216	12,954	2,745	3,780	6,714	629	9.8

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Table 22. Payments for Dental Service and Number of Participating Dentists
(Including Dental Clinics) by Location of Dentist: 1980 Fiscal Year

Location of Provider	PAYMENTS		DENTISTS		NUMBER OF DENTISTS IN PAYMENT GROUP					
	Amount	Percent of Total	Number	Percent of Total	Under \$100	\$100-\$999	\$1,000-\$4,999	\$5,000-\$9,999	\$10,000-\$19,999	\$20,000 and Over
Grand Total	\$6,622,081	100.0	1,483	100.0	289	477	430	124	85	78
Baltimore City	3,069,379	46.3	263	17.7	36	50	67	30	31	49
Total Counties	3,514,248	53.1	1,091	73.6	180	382	352	94	54	29
Allegany	145,003	2.2	32	2.2	3	6	16	3	2	2
Anne Arundel	399,669	6.0	116	7.8	15	37	42	12	8	2
Baltimore	651,906	9.8	222	15.0	40	82	67	20	7	6
Calvert	24,819	0.4	8	0.5	-	1	6	-	1	-
Caroline	21,133	0.3	4	0.3	-	-	3	-	1	-
Carroll	50,043	0.8	30	2.0	3	12	13	1	1	-
Cecil	61,525	0.9	12	0.8	-	4	3	2	3	-
Charles	84,909	1.3	19	1.3	-	8	6	2	2	1
Dorchester	60,127	0.9	11	0.7	-	1	4	5	1	-
Frederick	46,103	0.7	30	2.0	4	13	11	1	-	-
Garrett	40,715	0.6	14	0.9	1	3	7	3	-	-
Harford	249,719	3.8	55	3.7	5	16	25	1	3	5
Howard	48,729	0.7	32	2.2	4	17	9	1	1	-
Kent	31,666	0.5	4	0.3	-	-	2	-	2	-
Montgomery	446,747	6.8	225	15.2	64	97	41	15	5	3
Prince George's	538,889	8.1	177	12.0	31	59	56	19	9	3
Queen Anne's	8,641	0.1	5	0.3	-	2	3	-	-	-
St. Mary's	114,641	1.7	14	0.9	1	5	5	1	-	2
Somerset	18,201	0.3	6	0.4	1	1	3	1	-	-
Talbot	65,862	1.0	8	0.5	-	2	2	2	1	1
Washington	98,445	1.5	34	2.3	3	8	17	3	3	-
Wicomico	277,721	4.2	23	1.6	4	4	8	1	2	4
Worcester	29,035	0.5	10	0.7	1	4	3	1	1	-
Out-of-State	38,454	0.6	129	8.7	73	45	11	-	-	-

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Table 23. Payments for Home Health Services by Type of Service and Residence of Person Receiving Service: 1980 Fiscal Year

Residence of Person Served	Total	Nursing Service	Home Health Aide	Physical Therapy	Speech Therapy	Occupational Therapy	Medical Social Service	Other	Medicare Deductible
Maryland State	\$951,538	\$547,120	\$278,387	\$69,216	\$13,720	\$7,225	\$20,342	\$12,903	\$2,625
Baltimore City	542,123	313,868	171,863	31,628	3,972	3,026	8,848	7,952	966
Total Counties	409,415	233,252	106,524	37,588	9,748	4,199	11,494	4,951	1,659
Allegany	51,402	33,196	13,250	2,851	-	993	646	409	57
Anne Arundel	12,108	7,973	1,787	1,106	48	133	108	903	50
Baltimore	56,120	23,296	26,871	3,604	-	225	920	894	310
Calvert	(1,058)	(2,098)	-	1,040	-	-	-	-	-
Caroline	108	108	-	-	-	-	-	-	-
Carroll	3,311	1,994	105	1,188	-	-	-	-	24
Cecil	5,981	4,310	670	845	-	-	-	-	156
Charles	3,178	3,178	-	-	-	-	-	-	-
Dorchester	4,039	2,185	210	1,172	-	-	23	159	290
Frederick	11,778	7,627	1,461	723	1,916	-	-	-	51
Garrett	9,596	9,320	60	40	-	-	-	176	-
Harford	34,922	20,496	13,150	1,150	-	-	-	126	-
Howard	7,885	4,569	3,045	155	-	-	23	54	39
Kent	1,164	836	103	139	-	-	-	-	86
Montgomery	73,701	43,059	8,177	13,079	787	1,385	6,367	469	378
Prince George's	115,833	57,114	35,935	9,705	6,772	1,424	3,407	1,372	104
St. Mary's	2,436	1,550	-	350	225	-	-	311	-
Somerset	546	546	-	-	-	-	-	-	-
Talbot	2,345	2,231	-	-	-	-	-	-	114
Washington	4,254	2,824	950	441	-	39	-	-	-
Wicomico	9,766	8,938	750	-	-	-	-	78	-

Note: There were no payments for Home Health Services for the residents of Queen Anne's and Worcester Counties.

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Table 24. Payments for Special Services by Type of Service and Residence of Person Receiving Service: 1980 Fiscal Year

Residence of Persons Served	OPTOMETRIST - OPTICIAN SERVICES						Diagnostic Services (Labs)		Medical Supplies	Physical Therapy	Ded. & Coins.	No Medicare Part B Coverage
	Total	Diagnostic	Dispensing	Fabrication	Ambulance Service	Van Service	Podiatry					
Maryland State	\$5,595,335	\$852,978	\$482,255	\$1,172,442	\$178,881	\$204,233	\$307,782	\$903,117	\$677,857	\$19,692	\$762,554	\$33,544
Baltimore City	3,325,025	532,640	299,614	694,717	124,401	158,891	200,242	508,492	364,330	7,899	413,915	19,884
Total Counties	2,270,310	320,338	182,641	477,725	54,480	45,342	107,540	394,625	313,527	11,793	348,639	13,660
Allegany	63,851	13,849	8,270	20,015	2,627	258	2,603	1,460	8,322	-	6,184	263
Anne Arundel	285,277	37,198	22,685	52,535	7,782	7,556	17,069	50,978	37,609	3,753	45,377	2,735
Baltimore	402,713	44,850	24,269	64,478	19,057	17,616	17,325	59,906	52,380	2,868	95,048	4,916
Calvert	33,713	5,853	3,589	7,925	270	103	4,719	3,405	2,519	-	5,112	218
Caroline	26,116	4,626	3,093	8,744	579	-	168	2,364	3,148	76	3,050	268
Carroll	51,999	5,719	2,993	10,338	1,428	954	1,048	6,847	8,186	577	13,117	792
Cecil	51,607	12,181	7,241	12,558	713	66	298	2,713	9,989	(9)	5,722	135
Charles	52,640	9,824	6,504	13,629	212	106	875	7,548	6,807	86	6,863	186
Dorchester	41,860	8,629	5,360	16,290	106	44	4,816	1,454	2,029	2	3,128	2
Frederick	49,451	6,702	4,322	9,154	800	22	2,854	11,828	3,263	234	10,056	216
Garrett	24,157	4,987	3,279	6,802	816	-	16	689	5,925	-	1,576	67
Harford	120,778	22,980	11,786	21,568	5,236	657	4,892	14,891	24,332	633	13,142	661
Howard	54,188	4,214	2,300	8,153	3,034	564	1,926	18,172	6,557	81	8,549	638
Kent	17,482	5,076	2,142	4,580	304	21	-	640	2,110	196	2,161	252
Montgomery	239,625	14,519	7,259	47,016	4,266	3,114	24,345	62,809	26,877	1,941	42,775	4,704
Prince George's	427,132	59,012	28,746	84,881	455	12,418	16,755	129,339	53,572	947	45,253	(4,246)
Queen Anne's	25,697	5,836	2,892	6,856	358	100	462	1,716	3,507	298	3,633	39
St. Mary's	31,854	6,680	3,712	7,426	1,490	1,563	652	4,224	3,235	110	2,639	123
Somerset	34,937	7,403	4,782	10,928	1,254	-	1,014	929	1,509	-	6,917	201
Talbot	15,682	2,587	1,637	5,618	149	-	385	1,348	2,604	-	1,354	-
Washington	100,951	13,733	10,463	22,463	208	-	2,389	5,531	29,471	-	15,444	1,249
Wicomico	85,614	16,747	10,933	26,738	3,010	40	2,560	3,094	14,211	-	8,205	76
Worcester	32,986	7,133	4,384	9,030	326	140	369	2,740	5,365	-	3,334	165

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Table 25. Selected Summary Data on Program Operation:
Last Five Fiscal Years, 1976-1980

	FISCAL YEARS				
	1980	1979	1978	1977	1976
No. of persons receiving service (in thousands)	358	343	358	384	409
Payments: All Services* (in thousands)	\$367,655	\$301,909	\$263,118	\$242,219	\$226,860
Hospital Inpatient	169,533	137,008	117,473	106,978	94,295
Skilled Nursing Home**	-	2,943	34,839	32,148	28,174
Comprehensive Care	103,213	84,291	39,327	32,882	28,939
Hospital Outpatient	37,820	31,166	26,643	24,891	23,671
Physician	25,800	20,372	20,604	21,072	19,571
Pharmacy	18,119	15,872	15,241	15,217	17,838
Dental	6,622	5,093	4,593	4,852	10,010
Home Health	952	789	618	531	422
Special Services	5,595	4,375	3,780	3,647	3,941
Average No. of Persons Enrolled (in thousands)	376	366	380	406	425
Federally Matched Indigent Categories	269	264	271	281	290
Federally Matched Medically Indigent Categories	45	43	45	56	69
Non-Federally Matched Categories	62	59	64	69	66
Average Payment Per Enrollee Year: All Services*	\$ 977	\$ 825	\$ 692	\$ 597	\$ 534
Federally Matched Indigent Categories	645	545	469	406	354
Federally Matched Medically Indigent Categories	2,855	2,420	1,981	1,547	1,241
Non-Federally Matched Categories	1,055	912	726	607	592
Average Payment Per Enrollee Year: All Services*	\$ 977	\$ 825	\$ 692	\$ 597	\$ 534
Hospital Inpatient	451	375	309	264	222
Skilled Nursing Home**	-	8	92	79	67
Comprehensive Care	274	230	103	81	68
Hospital Outpatient	100	85	70	61	56
Physicians	69	56	54	52	46
Pharmacy	48	43	40	38	42
Dental	18	14	12	12	24
Home Health	2	2	2	1	#
Special Service	15	12	10	9	9

NOTE: Due to rounding, all columns may not sum to totals.

Less than \$1.00

* Does not include premiums for buy-in Part B of Medicare; capitation payments for Health Maintenance Organizations; payment for Early and Periodic Screening, Diagnosis and Treatment; or payment for General Transportation Services.

** As of July 1, 1979, Skilled Nursing Care was no longer provided under the Medical Assistance Program.

MARYLAND MEDICAL ASSISTANCE PROGRAM

Table 25. Selected Summary Data on Program Operation (Continued)

	FISCAL YEARS				
	1980	1979	1978	1977	1976
<u>Hospital Inpatient Program</u>					
No. of persons receiving service	68,662	61,371	63,002	67,992	67,175
Payments: Total	\$169,532,879	\$137,008,199	\$117,473,293	\$106,978,368	\$94,295,349
<u>General Hospitals</u>					
No. of persons receiving service	67,721	60,387	60,409	65,414	64,274
Payments: Total	\$161,470,329	\$130,592,565	\$112,483,391	\$101,493,015	\$88,817,397
Inpatient care	\$158,115,084	\$127,965,838	\$110,354,981	\$ 99,091,240	\$87,284,618
Medicare - Ded. & Coins.	\$ 3,357,862	\$ 2,626,727	\$ 2,128,410	\$ 2,401,775	\$ 1,532,779
Number of days of care	585,848	521,186	504,099	518,538	524,778
Average per diem interim payment	\$ 269.89	\$ 245.53	\$ 218.92	\$ 191.10	\$ 166.33
Number of discharges	71,727	64,986	62,648	64,382	67,368
Av. no. of days per discharge	8.2	8.0	8.0	8.1	7.8
Av. no. of days per enrollee year	1.56	1.42	1.33	1.28	1.24
<u>Special Hospitals</u>					
No. of persons receiving service	1,376	1,384	3,128	3,224	3,316
Payments: Total	\$ 8,062,550	\$ 6,415,634	\$ 4,989,902	\$ 5,485,353	\$ 5,477,952
Inpatient care	\$ 7,686,786	\$ 6,005,471	\$ 4,357,060	\$ 4,745,916	\$ 5,113,255
Medicare - Ded. & Coins.	373,147	410,163	632,842	739,437	364,697
Number of days of care	67,895	57,895	50,710	64,759	89,467
Average per diem interim payment	\$ 113.22	\$ 103.73	\$ 85.92	\$ 73.29	\$ 57.15
Av. no. of days per enrollee year	0.18	0.16	0.13	0.16	0.21

MARYLAND MEDICAL ASSISTANCE PROGRAM

Table 25. Selected Summary Data on Program Operation (Continued)

<u>Nursing Home Program</u>	FISCAL YEARS				
	<u>1980*</u>	<u>1979</u>	<u>1978</u>	<u>1977</u>	<u>1976**</u>
No. of persons receiving service	15,481	14,565	13,918	13,573	13,694
Payments: Total	\$103,213,195	\$87,233,510	\$74,165,134	\$65,030,149	\$57,112,123
<u>Skilled Nursing Care & Care in E.C.F.</u>					
No. of persons receiving service	-	5,282	7,243	7,519	7,838
Payments:					
Skilled Nursing Care	-	\$2,782,123	\$34,693,763	\$31,992,292	\$28,046,921
E.C.F. Care	-	\$160,856	\$144,821	\$155,656	\$126,666
No. of days of care:					
Skilled Nursing Care	-	120,005	1,611,725	1,599,351	1,512,993
E.C.F. Care	-	14,719	15,467	19,632	18,510
Av. per diem payment:					
Skilled Nursing Care	-	\$23.18	\$21.53	\$20.00	\$18.54
E.C.F. Care	-	\$10.93	\$9.36	\$7.93	\$6.84
Av. No. of days per enrollee year:					
Skilled Nursing Care	-	0.33	4.24	3.94	3.56
E.C.F. Care	-	0.04	0.04	0.05	0.04
<u>Comprehensive Care</u>					
No. of persons receiving service	15,481	14,079	7,863	7,365	7,225
Payments	\$103,213,195	\$84,290,531	\$39,326,550	\$32,882,201	\$28,938,536
No. of days of care	4,249,801	3,688,250	2,032,274	1,872,843	1,755,070
Av. per diem payment	\$24.29	\$22.85	\$19.35	\$17.56	\$16.49
Av. no. of days per enrollee year	11.29	10.08	5.35	4.61	4.13

*As of July 1, 1978, Skilled Nursing Care was no longer provided under the Medical Assistance Program.

**As of January 1, 1976, payments include over-the-counter drug costs.

MARYLAND MEDICAL ASSISTANCE PROGRAM

Table 25. Selected Summary Data on Program Operation (Continued)

<u>Hospital Outpatient Program</u>	FISCAL YEARS				
	1980	1979	1978	1977	1976
No. of persons receiving service	207,039	195,428	198,274	202,631	218,910
Payment: Total	\$37,819,979	\$31,166,396	\$26,642,525	\$24,891,308	\$23,670,557
Emergency Room & Outpatient					
Department Visits	\$19,054,253	\$16,138,876	\$13,585,550	\$11,876,928	\$11,889,820
Ancillary Services	\$16,952,423	\$13,449,595	\$11,513,165	\$11,502,911	\$10,978,738
Medicare - Ded. & Coins.	1,813,303	1,577,925	1,543,810	1,511,469	801,999
No. of Emergency Room & Outpatient					
Department Visits	699,156	637,548	605,977	582,869	676,869
Average payment per visit	\$ 27.25	\$ 25.31	\$ 22.42	\$ 20.38	\$ 17.57
Av. pay. ancillary service per visit	\$ 24.25	\$ 21.10	\$ 19.00	\$ 19.74	\$ 16.22
Av. no. of E.R. and O.P.D. visits per enrollee year	1.86	1.74	1.59	1.44	1.59
Av. no. of E.R. and O.P.D. visits per persons receiving service	3.38	3.26	3.06	2.88	3.09

MARYLAND MEDICAL ASSISTANCE PROGRAM

Table 25. Selected Summary Data on Program Operation (Continued)

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<u>Physician Services</u>	FISCAL YEARS				
	1980	1979	1978	1977	1976
No. of persons receiving services	269,369	251,455	270,956	292,303	298,272
Payments: Total	\$25,800,272	\$20,371,904	\$20,604,066	\$21,072,239	\$19,570,920
<u>Home, Office & Nursing Home Service</u>					
No. of persons receiving services	209,336	196,613	214,631	226,197	234,827
Payments: Total	\$12,001,431	\$ 9,798,037	\$10,484,864	\$10,961,359	\$10,604,630
Visits	\$ 6,108,114	\$ 4,972,675	\$ 4,919,067	\$ 5,131,114	\$ 5,175,017
Other Specified Services	\$ 4,455,733	\$ 4,095,303	\$ 4,471,980	\$ 4,488,522	\$ 4,534,840
Medicare - Dec. & Coins.	\$ 1,437,584	\$ 730,059	\$ 1,093,817	\$ 1,341,723	\$ 894,773
Number of Visits	703,753	638,977	704,408	734,724	761,601
Average payment per visit	\$ 8.68	\$ 7.78	\$ 6.98	\$ 6.98	\$ 6.79
No. of visits per enrollee year	1.87	1.75	1.85	1.81	1.79
No. of visits per person receiving service	3.36	3.25	3.28	3.25	3.24
<u>In Hospital Service</u>					
No. of persons receiving services	143,924	129,672	139,698	157,790	152,216
Payment: Total*	\$13,798,841	\$10,573,867	\$10,119,202	\$10,110,880	\$ 8,966,290
Service to Inpatients	\$ 9,585,957	\$ 7,371,884	\$ 6,558,340	\$ 6,235,003	\$ 5,938,432
Outpatients	\$ 1,568,043	\$ 1,229,824	\$ 1,235,373	\$ 1,254,745	\$ 1,187,747
Emergency Rm. Pts.	\$ 658,309	\$ 810,588	\$ 738,641	\$ 916,739	\$ 880,272
No Medicare Part B and Medicare - Dec. & Coins.	\$ 1,986,532	\$ 1,161,571	\$ 1,586,848	\$ 1,704,393	\$ 959,839

*Includes payments to dentists for oral surgery performed on patients in hospital.

1979 F.Y. \$108
1978 F.Y. \$215
1977 F.Y. \$473
1976 F.Y. \$892

MARYLAND MEDICAL ASSISTANCE PROGRAM

Table 25. Selected Summary Data on Program Operation (Continued)

Pharmacy Service	FISCAL YEARS				
	1980	1979	1978	1977	1976
No. of persons receiving service	249,657	238,565	251,028	264,710	301,126
Payments: Total	\$18,119,414	\$15,872,172	\$15,240,882	\$15,217,274	\$17,837,950
Legend	\$17,639,166	\$15,533,064	\$14,914,910	\$14,823,919	\$16,072,903
Over-the-Counter	\$ 480,248	\$ 339,108	\$ 325,972	\$ 393,355	\$ 1,765,047
Number of invoices: Total	2,441,939	2,334,147	2,445,366	2,610,410	3,303,461
Legend	2,383,856	2,289,852	2,399,871	2,559,113	2,840,125
Over-the-Counter	58,083	44,295	45,495	51,297	463,336
Average Payment per invoice:	\$ 7.42	\$ 6.80	\$ 6.23	\$ 5.83	\$ 5.40
Legend	\$ 7.40	\$ 6.78	\$ 6.21	\$ 5.79	\$ 5.66
Over-the-Counter	\$ 8.27	\$ 7.66	\$ 7.16	\$ 7.67	\$ 3.81
Av. No. of invoices per enrollee year	6.5	6.4	6.4	6.4	7.8
Av. no. of invoices per person receiving service	9.8	9.8	9.7	9.9	11.0

MARYLAND MEDICAL ASSISTANCE PROGRAM

Table 25. Selected Summary Data on Program Operation (Continued)

<u>Dental Service</u>	FISCAL YEARS				
	1980	1979	1978	1977	1976
No. of persons receiving service	84,733	76,934	76,383	81,943	114,365
Payments: Total	\$6,622,081	\$5,092,534	\$4,593,107	\$4,852,090	\$10,010,421
Diagnostic	905,511	862,236	832,687	865,340	1,279,092
Preventive	807,458	704,647	624,924	696,167	979,651
Restorative	1,786,919	1,512,044	1,322,542	1,452,635	2,389,586
Endo/Periodontic	438,165	380,489	339,602	330,535	512,155
Prosthodontic	1,177,721	169,381	171,805	244,999	3,071,512
Oral Surgery	851,262	777,139	727,745	769,326	1,194,304
Other Specified Service	655,045	686,598	573,802	493,088	584,121
Selected Service - Number of					
Prophylaxes	54,316	50,585	51,494	58,664	84,592
Fluoride Treatments	45,840	45,346	45,668	51,359	65,355
Fillings	144,868	135,141	140,269	155,264	250,527
Extractions	69,823	61,389	57,311	60,731	100,095
Full Upper or Lower Dentures	3,208	67	95	233	9,376
Partial Dentures	3,416	597	706	1,157	12,894

MARYLAND MEDICAL ASSISTANCE PROGRAM

Table 25. Selected Summary Data on Program Operation (Continued)

	FISCAL YEARS				
	1980	1979	1978	1977	1976
<u>Home Health Service</u>					
Number of persons receiving service	1,950	2,278	2,076	1,999	2,088
Payments: Total	\$ 951,538	\$ 788,928	\$ 618,586	\$ 530,668	\$ 422,022
Nursing Service	547,120	520,852	409,682	382,734	300,757
Home Health Aid	278,387	170,232	115,418	77,356	66,198
Physical, Occup., Speech Therapy	90,161	73,176	63,506	50,871	33,158
Other Specified Service	33,245	16,998	21,480	11,163	9,854
No. Medicare Part B. Coverage and Medicare - Deductible	2,625	7,670	8,500	8,544	12,055
<u>Special Service</u>					
Number of persons receiving service	106,928	94,025	88,765	90,226	98,937
Payments: Total	\$5,595,335	\$4,375,456	\$3,780,084	\$3,646,518	\$3,940,649
Optometrists & Opticians Service	2,507,675	2,001,109	1,772,011	1,778,659	2,276,531
Ambulance & Van Service*	383,114	326,461	184,947	184,156	184,385
Diagnostic Service (including labs)	903,117	765,698	614,519	441,361	406,404
Medical Supplies	677,857	557,906	416,664	352,233	207,591
Podiatry	307,782	229,214	126,368	133,989	227,081
Physical Therapy	19,692	15,019	17,199	15,244	14,388
No Medicare Part B. Coverage and Medicare - Ded. & Coins.	796,098	480,049	648,376	740,876	624,269

*Program began reimbursement of Van Services in November, 1977.

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Appendix A. Payments to Special Clinics Participating in the Program for Physician Service in the Office,
Home and Nursing Home: 1980 Fiscal Year

Name and Location	Total Amount Paid	Number of Patients	Average Payment Per Patient
Federal Family Planning Project - Baltimore City	\$153,740	4,748	\$ 32.37
Planned Parenthood Surgical - Baltimore City	147,420	1,170	126.00
Provident Hospital Project ADAPT - Baltimore City	122,220	270	452.66
North Baltimore Center, Inc. - Baltimore City	119,080	559	213.02
Baltimore City Health Dept., Family Planning Project - Baltimore City	119,006	3,365	35.36
E.V.M.C. Women's Clinic - Baltimore City	106,841	1,338	79.85
Planned Parenthood of Maryland - Baltimore City	100,459	2,807	35.78
Hillcrest Clinic & Counseling Service - Baltimore County	94,884	931	101.91
Methadone Maintenance Treatment Program - Baltimore City	81,375	162	502.31
East Baltimore Drug Abuse Center - Baltimore City	80,120	395	202.83
Hillcrest Abortion Clinic - Washington, D.C.	62,488	530	117.90
West End Drug Abuse Center - Baltimore City	50,985	94	542.39
South East Baltimore Drug Treatment Program - Baltimore City	40,395	105	384.71
Man Alive Research Program - Baltimore City	38,181	95	401.90
Glenwood Life Counseling Center - Baltimore City	37,890	110	344.45
Eastern Community Mental Health Center - Baltimore County	35,688	251	142.18
Harbel, Inc., Community Mental Health Center - Baltimore City	29,355	190	154.50
Cherry Hill Drug Abuse Program - Baltimore County	27,484	66	416.42
Sigma Reproductive Health Center - Montgomery County	27,423	240	114.26
North West Drug Alert - Baltimore City	24,570	68	361.32
Southeastern Community Mental Health Center - Baltimore County	21,165	192	110.23
Sheppard & Pratt Hospital COMDAP - Baltimore County	18,332	47	390.04
Health Department Drug Treatment Center - Prince George's County	16,230	51	318.23
Southwestern Community Mental Health Center - Baltimore County	15,930	153	104.11
Northern Baltimore County Community Mental Health Center - Balto. Co.	11,614	149	77.94
Coflac Clinic - Baltimore City	10,755	459	23.43
Garrett County Mental Health Services - Garrett County	10,581	119	88.91
Northwestern Community Mental Health Center - Baltimore County	6,660	69	96.52
Preterm Clinic - Washington, D.C.	5,875	47	125.00
Alternatives, Inc. - Montgomery County	3,897	32	121.78
Frederick Methadone Program - Frederick County	3,855	10	385.50
Abortion Associates - Prince George's County	3,155	30	105.16

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Appendix A. Payments to Special Clinics Participating in the Program for Physician Service in the Office,
Home and Nursing Home: 1980 Fiscal Year (Continued)

<u>Name and Location</u>	<u>Total Amount Paid</u>	<u>Number of Patients</u>	<u>Average Payment Per Patient</u>
Planned Parenthood - Prince George's County	\$ 3,054	117	\$ 26.09
Anne Arundel Health Dept. Methadone Program - Anne Arundel County	1,892	11	172.00
Harford County Drug Abuse - Harford County	1,399	5	279.84
Provident Community Mental Health Center - Baltimore City	390	8	48.75
Wicomico Health Department Drug Program - Wicomico County	295	12	24.54
D.C. Institute of Mental Hygiene - Washington, D.C.	8,973	43	208.67

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MARYLAND MEDICAL ASSISTANCE PROGRAM

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Appendix B. Participating Institutional Pharmacies with Payment and Number of Invoices:
Pharmacy Program, 1980 Fiscal Year

Name and Location	Number	ALL INVOICES	
		Amount Paid	Average Payment Per Invoice
Johns Hopkins Hospital Pharmacy - Baltimore City	47,652	\$385,511	\$8.09
University Hospital Pharmacy - Baltimore City	30,157	219,129	7.26
Bon Secours Hospital Pharmacy - Baltimore City	25,114	189,583	7.54
Baltimore City Hospital Pharmacy - Balto. City	16,732	119,924	7.16
Mercy Hospital Pharmacy - Baltimore City	12,345	103,531	8.38
GBMC - BSC Pharmacy - Baltimore City	13,385	71,180	5.31
Sinai Hospital - Baltimore City	9,289	63,199	6.80
Union Memorial Hospital Pharmacy - Balto. City	8,229	56,133	6.82
Maryland General Hospital Pharmacy - Balto. City	6,804	44,501	6.54
Church Hospital Pharmacy - Baltimore City	4,099	30,487	7.43
Prince George General Hospital Pharmacy - Pr. Geo. Co.	3,462	28,368	8.19
Montgomery General Hospital Pharmacy - Montgomery Co.	2,689	26,571	9.88
Provident Hospital - Baltimore City	3,414	23,704	6.94
Franklin Square Hospital Pharmacy - Baltimore County	3,203	22,940	7.16
Good Samaritan Hospital Pharmacy - Balto. City	2,537	21,067	8.30
McCready Hospital Pharmacy - Somerset County	1,799	19,805	11.00
Keswick Home Pharmacy - Baltimore City	2,754	17,394	6.31
Peninsula General Hospital Pharmacy - Wicomico Co.	2,160	14,822	6.86
West Baltimore Comm. Health Center Pharmacy - Baltimore City	1,713	10,057	5.87
South Baltimore General Hospital Pharmacy - Baltimore City	1,799	9,975	5.54
Fallston Nursing Center Pharmacy - Harford County	1,206	9,318	7.72
Constant Care Comm. Health Ctr.-Baltimore City	838	6,630	7.91
E. Leland Memorial Hospital Pharmacy - Prince George's County	587	3,973	6.76
St. Joseph's Hospital Pharmacy - Baltimore Co.	236	2,384	5.49
S. Cty. Family Health Ctr. Pharmacy - Anne Arun. Co.	59	1,868	7.91

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Appendix B. Participating Institutional Pharmacies with Payment and Number of Invoices:
Pharmacy Program, 1980 Fiscal Year (Cont'd)

<u>Name and Location</u>	<u>Number</u>	<u>ALL INVOICES</u>	
		<u>Amount Paid</u>	<u>Average Payment Per Invoice</u>
Children's Hospital Pharmacy - Washington, D.C.	59	\$ 1,805	\$30.58
Univ. of Maryland Dental Pharmacy - Baltimore City	288	823	2.85
Lutheran Hospital Pharmacy - Baltimore City	132	799	6.04
Doctor's Hospital Pharmacy - Pr. George's Co.	47	288	6.12
James L. Kernan Hospital Pharmacy - Balto. City	37	198	5.35
Howard County General Hospital Pharmacy - Howard County	11	21	1.89
N. C. Baptist Hospital Pharmacy - North Carolina	2	14	7.00

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Appendix C. Fifty Proprietary Pharmacies Receiving Largest Payment and Number of
Invoices: Pharmacy Program, 1980 Fiscal Year

Name and Location	Number	ALL INVOICES	
		Amount Paid	Average Payment Per Invoice
Institutional Pharmacy Service - Balto. City	73,750	\$548,494	\$7.43
Rudies Pharmacy - Baltimore City	40,570	328,557	8.09
Howard & Morris Institutional - Balto. County	40,041	310,012	7.74
M.S.C. RX - Baltimore County	30,674	280,950	9.15
Penn-Dol Pharmacy - Baltimore City	26,308	212,304	8.06
Maryland Pharmacy - Baltimore City	25,171	201,349	7.99
Northwest Comm. Prof. Pharmacy - Balto. City	26,836	199,974	7.45
Harlem Park Ethical Pharmacy - Balto. City	19,438	166,912	8.58
Eakles Drug Store - Washington, D.C.	21,116	162,584	7.69
Cherry Hill Pharmacy Clinic - Baltimore County	22,047	150,504	6.82
Wood Haven Pharmacy - Baltimore County	17,165	138,184	8.05
Accredited Surgical Co. - Montgomery County	18,716	138,057	7.37
Northern Pharmacy - Baltimore City	18,031	135,256	7.50
Drug Lane - Prince George's County	20,076	133,981	6.67
Capitol Pharmacy - Washington, D.C.	16,735	132,669	7.92
Gitomers Pharmacy - Anne Arundel County	19,646	129,336	6.58
Carter Drug Co. - Baltimore City	14,460	121,612	8.41
Federal Health Service - Div. of Federal Lab - Washington, D.C.	16,749	118,295	7.06
Edwards & Anthony Pharmacy - Baltimore City	12,251	106,152	8.66
Garwyn Ethical Pharmacy - Baltimore City	15,446	105,909	6.85
Fishers Pharmacy - Washington, D.C.	14,478	105,598	7.29
Kirson Drug Co. - Baltimore City	11,986	103,329	8.62
Klotzmans Pharmacy - Baltimore County	12,829	103,118	8.03
Kreis Pharmacy - Baltimore City	16,994	103,022	6.06
Nationwide Pharmacy Ctr - Calvert County	13,085	98,763	7.54
Potomac Valley Pharmacy - Allegany County	15,077	94,314	6.25
Kays Pharmacy - Baltimore City	11,248	93,967	8.35
Rite Aid #351 - Baltimore City	11,900	93,684	7.87
Pharmacy Forty-Two - Baltimore City	12,632	92,373	7.31
James Drug Company - Baltimore City	11,810	91,136	7.71

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Appendix C. Fifty Proprietary Pharmacies Receiving Largest Payment and Number of
Invoices: Pharmacy Program, 1980 Fiscal Year (Cont'd)

Name and Location	Number	ALL INVOICES	
		Amount Paid	Average Payment Per Invoice
Sappes Pharmacy - Baltimore City	13,951	\$ 89,019	\$6.38
Madison Park Prof. Pharmacy - Baltimore City	10,775	88,521	8.21
Central Drugs - Wicomico County	13,112	88,182	6.26
City Pharmacy of Elkton - Cecil County	12,369	87,113	7.04
Rite Aid #364 - Baltimore City	11,351	86,670	7.63
Edwards Pharmacy - Baltimore City	13,730	86,016	6.30
Pratt Professional Pharmacy - Baltimore City	13,477	85,781	6.36
Edgehill Pharmacy - Caroline County	10,695	83,256	7.78
Rite Aid #354 - Baltimore City	10,886	82,289	7.55
Broadway Pharmacy - Baltimore City	10,811	81,818	7.56
Q & B Pharmacy - Baltimore City	10,670	81,688	7.65
Deer Park Pharmacy - Montgomery County	15,003	80,871	5.39
Kruger Drug - Baltimore City	10,298	76,748	7.45
Rite Aid #349 - Baltimore City	10,915	76,647	7.02
Gordey's Pharmacy - Wicomico County	8,862	76,623	8.64
Bambricks Pharmacy - Dorchester County	11,538	74,660	6.47
Ames Plaza Drugs - Wicomico County	9,218	72,348	7.84
Beelis Pharmacy - Baltimore City	9,102	71,407	7.84
Citizens Pharmacy Service - Baltimore County	9,533	70,879	7.43
St. Mary's Pharmacy - St. Mary's County	9,571	70,039	7.31

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Appendix D. Participating Dental Clinics with Payments by Type of Service: Dental Program, 1980 Fiscal Year

Name and Location	Amount Paid	Number of Patients	Av. Payment Per Patient	AMOUNT PAID BY TYPE OF SERVICE						
				Diagnostic	Preventive	Restorative	Endo/Periodontic	Prosthodontic	Oral Surgery	Other
Provident Hospital Inc., - Baltimore City	\$59,681	932	\$ 64.04	\$14,586	\$2,908	\$14,312	\$4,247	\$9,942	\$8,052	\$5,634
Greater Baltimore Medical Center - Balto. City	57,301	1,396	41.05	8,362	13,549	20,592	3,693	1,868	3,813	5,424
Comprehensive Child Care JHH - Baltimore City	53,642	1,563	34.32	14,361	16,832	14,319	2,609	255	2,789	2,477
Cherry Hill Dental Clinic - Baltimore City	32,525	696	46.73	2,821	10,590	6,809	-	-	12,182	123
Provident - Druid C&Y Dental - Baltimore City	31,681	905	35.01	10,795	9,098	6,100	120	-	2,216	3,352
University of MD Dental Clinic - Balto. City	31,607	1,267	24.95	2,314	3,782	12,034	3,480	1,435	4,847	3,715
Community Pediatric Center - Univ. of MD, B. City	30,700	954	32.18	8,254	8,868	10,152	270	186	1,571	1,399
Chesapeake Physician, P.A. Dental-Balto. City	30,516	891	34.25	3,849	5,510	6,953	3,035	1,178	5,440	4,551
Johns Hopkins Hospital Dental Clinic-Balto. City	18,654	390	47.83	6,373	427	720	446	939	4,983	4,766
Druid Dental Clinic - Baltimore City	12,610	589	21.41	1,620	4,073	1,631	30	-	4,024	1,232
Cecil County Dental Clinic - Cecil County	11,338	205	55.31	793	1,686	3,397	265	560	801	3,836
Eastern Dental Clinic - Baltimore City	11,276	407	27.71	1,986	4,127	3,484	20	-	931	728
JFK Institute Dental Dept-Balto. City	10,882	242	44.97	1,160	3,397	3,908	265	85	677	1,390
Community Preventive Dentistry-Balto. City	10,742	548	19.60	50	7,077	2,772	160	-	587	96
St. Francis Dental Center - Baltimore City	9,496	165	57.55	686	739	2,740	790	3,311	646	584
Scope Inc.-Somerset Dental Center-Somerset Co.	8,662	154	56.25	2,119	982	3,480	498	650	281	652
Southern Dental Clinic - Baltimore City	8,019	283	28.34	1,017	2,468	2,426	130	63	1,363	552
West Baltimore Community Health Care Corp.- Baltimore City	7,548	144	52.42	1,167	151	309	435	3,995	933	558
Mercy Hospital Dental Clinic-Baltimore City	6,982	253	27.60	630	557	1,112	414	1,173	1,755	1,341
Health Maternity Dental Project - Balto. City	6,612	247	26.77	15	2,337	3,738	-	-	474	48
Children's Hospital Inc., Dental-Balto. City	6,559	49	133.86	369	340	1,411	1,005	300	3,050	84
Waxter Center Dental Clinic - Baltimore City	5,127	238	21.54	4	810	66	935	765	2,055	492
Sinai Hospital Dental Clinic - Baltimore City	4,460	122	36.56	1,240	313	1,331	162	56	875	483
Allegany Community College Dental Clinic - Allegany County	3,941	220	17.91	836	3,105	-	-	-	-	-
Western Dental Clinic - Baltimore City	3,576	161	22.21	158	1,208	1,137	135	85	733	120

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Appendix D. Participating Dental Clinics with Payments by Type of Service: Dental Program, 1980 Fiscal Year (Continued)

Name and Location	Amount Paid	Number of Patients	Av. Pay- ment Per Patient	AMOUNT PAID BY TYPE OF SERVICE						
				Diag- nostic	Preven- tive	Restor- ative	Endo/ Perio- dontic	Frostho- dontic	Oral Surgery	Other
Southeastern Health District Dental - Baltimore City	\$ 2,753	95	\$ 28.98	\$ 224	\$ 1,006	\$ 210	\$ -	\$ 998	\$ 43	\$ 272
St. Agnes Hospital Dental Clinic - Baltimore City	1,789	64	27.95	81	348	739	360	-	81	180
Upper Eastern Shore Mobile Dental Clinic- Queen Annes County	1,377	61	22.57	107	832	275	40	4	11	108
Maryland School for Blind - Baltimore City	935	50	18.70	108	482	335	-	-	10	-
North Central Balto. Health Corp. - Baltimore City	598	35	17.09	165	113	119	-	-	90	111
Grantsville Health Center Dental - Garrett Co.	370	17	21.76	103	13	148	55	-	-	51
Mount Wilson Center Dental - Balto. Co.	252	8	31.53	-	-	-	-	252	-	-
Crownsville Hospital Center Dental - Anne Arundel County	177	2	88.64	-	-	-	-	177	-	-
Eastern Baltimore Medical Program Dental Clinic - Baltimore City	60	7	8.57	7	-	-	-	-	-	-
Dental Hygiene Program - CCB - Baltimore City	4	1	4.00	-	4	-	-	-	-	-

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Appendix E. Number of Visits, Number of Screenings, and Total Expenditures under the
Early and Periodic Screening, Diagnosis and Treatment Program, 1980 Fiscal Year

<u>County</u>	<u>Number of Visits</u>	<u>Percent of Total</u>	<u>Number of Screenings</u>	<u>Percent of Total</u>	<u>Total Expenditures</u>	<u>Percent of Total</u>
Maryland State	20,084	100.0	5,905	100.0	\$277,570	100.0
Baltimore City	4,554	22.7	1,369	23.2	63,840	23.0
Total Counties	15,530	77.3	4,536	76.8	213,730	77.0
Allegany	798	4.0	228	3.9	10,830	3.9
Anne Arundel	2,572	12.8	782	13.2	36,320	13.1
Baltimore	688	3.4	112	1.9	6,800	2.4
Calvert	305	1.5	117	2.0	5,035	1.8
Caroline	345	1.7	106	1.8	4,905	1.8
Carroll	198	1.0	108	1.8	4,230	1.5
Cecil	759	3.8	244	4.1	11,115	4.0
Charles	569	2.8	201	3.4	8,875	3.2
Dorchester	194	1.0	57	1.0	2,680	1.0
Frederick	571	2.8	144	2.4	7,175	2.6
Garrett	388	1.9	29	0.5	2,810	1.0
Harford	617	3.1	112	1.9	6,445	2.3
Howard	137	0.7	20	0.3	1,285	0.5
Kent	41	0.2	18	0.3	745	0.3
Montgomery	952	4.7	423	7.2	17,450	6.3
Prince George's	3,020	15.0	566	9.6	32,080	11.6
Queen Anne's	154	0.8	69	1.2	2,840	1.0
St. Mary's	281	1.4	82	1.4	3,865	1.4
Somerset	371	1.9	133	2.2	5,845	2.1
Talbot	78	0.4	10	0.2	690	0.2
Washington	624	3.1	229	3.9	9,990	3.6
Wicomico	1,427	7.1	510	8.6	22,435	8.1
Worcester	441	2.2	236	4.0	9,285	3.3